

# Texas Department of Aging and Disability Services

## ICF/IID Directory

December, 2016

Sorted by: County, City, Facility Name

County	ANDERSON			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER	
Facility Information:		Facility ID:	003868		<u>Owner Information</u>				
ELKHART INN COMMUNITY HOME			EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP						
208 FM 1817			9901 LINN STATION ROAD						
ELKHART		TX	75839		LOUISVILLE		KY	40223-3808	
Phone	(903) 764-5072		Fax						
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/01/2017	
County	ANDERSON			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER	
Facility Information:		Facility ID:	007294		<u>Owner Information</u>				
CRESTVIEW COMMUNITY HOME			EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP						
216 CREST DR			9901 LINN STATION ROAD						
PALESTINE		TX	75801-7360		LOUISVILLE		KY	40223-3808	
Phone	(903) 729-1898		Fax						
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/01/2017	
County	ANDERSON			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER	
Facility Information:		Facility ID:	003685		<u>Owner Information</u>				
MAVERICK COMMUNITY HOME			EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP						
427 MAVERICK DR			9901 LINN STATION ROAD						
PALESTINE		TX	75801		LOUISVILLE		KY	40223-3808	
Phone	(903) 723-0777		Fax	(713) 622-9141		PHONE:		(502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/01/2017	
County	ANDERSON			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER	
Facility Information:		Facility ID:	007456		<u>Owner Information</u>				
REDWOOD TERRACE COMMUNITY HOME			EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP						
115 REDWOOD DR			9901 LINN STATION ROAD						
PALESTINE		TX	75801-5826		LOUISVILLE		KY	40223-3808	
Phone	(903) 729-6700		Fax	(713) 622-9141		PHONE:		(502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/01/2017	
County	ANDERSON			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER	
Facility Information:		Facility ID:	003928		<u>Owner Information</u>				
WESTWOOD COMMUNITY HOME			EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP						
219 BROOKVIEW LN			9901 LINN STATION ROAD						
PALESTINE		TX	75801		LOUISVILLE		KY	40223-3808	
Phone	(903) 729-8711		Fax	(713) 622-9141		PHONE:		(502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/01/2017	

County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
<b>Facility Information:</b>	<b>Facility ID:</b> 007606	<b>Owner Information</b>			
DIBOLL HOUSE		THE BURKE CENTER			
200 STUBBLEFIELD		1111			
DIBOLL	TX 75941	TX			
<b>Phone</b> (409) 639-1636	<b>Fax</b>				
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b>	<b>FAX:</b>	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	GOVERNMENT BASED
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b>		
County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
<b>Facility Information:</b>	<b>Facility ID:</b> 007534	<b>Owner Information</b>			
510 JEFFERSON		ST GILES LIVING CENTERS INC			
510 JEFFERSON		2007 HOWARD STREET			
LUFKIN	TX 75901	LUFKIN TX 75901			
<b>Phone</b> (936) 639-1615	<b>Fax</b> (936) 639-1632				
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (936) 639-1610	<b>FAX:</b> (936) 639-1632	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 09/01/2017		
County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
<b>Facility Information:</b>	<b>Facility ID:</b> 003860	<b>Owner Information</b>			
COOPER COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
105 COOPER ST		9901 LINN STATION ROAD			
LUFKIN	TX 75904	LOUISVILLE KY 40223-3808			
<b>Phone</b> (936) 639-1573	<b>Fax</b> (713) 622-9141				
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (502) 394-2100	<b>FAX:</b> (502) 394-2285	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 01/01/2017		
County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
<b>Facility Information:</b>	<b>Facility ID:</b> 007355	<b>Owner Information</b>			
CUNNINGHAM HOUSE		THE BURKE CENTER			
1010 CUNNINGHAM RD		1111			
LUFKIN	TX 75901	TX			
<b>Phone</b> (409) 634-2257	<b>Fax</b>				
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b>	<b>FAX:</b>	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	GOVERNMENT BASED
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b>		
County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
<b>Facility Information:</b>	<b>Facility ID:</b> 007522	<b>Owner Information</b>			
HOWARD HOUSE		ST GILES LIVING CENTERS INC			
2007 HOWARD STREET		2007 HOWARD STREET			
LUFKIN	TX 75901	LUFKIN TX 75901			
<b>Phone</b> (936) 639-1610	<b>Fax</b> (936) 639-1632				
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (936) 639-1610	<b>FAX:</b> (936) 639-1632	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 09/01/2017		
County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
<b>Facility Information:</b>	<b>Facility ID:</b> 003857	<b>Owner Information</b>			
HUDSON COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
164 FREEMAN CEMETERY RD		9901 LINN STATION ROAD			
LUFKIN	TX 75904	LOUISVILLE KY 40223-3808			
<b>Phone</b> (936) 875-3078	<b>Fax</b>				
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (502) 394-2100	<b>FAX:</b> (502) 394-2285	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 01/01/2017		

County	ANGELINA		Reg Svcs:	REGION 5 ICF/IID		Region	05 - BEAUMONT	
Facility Information:		Facility ID:	007439		<u>Owner Information</u>			
KARLA HOUSE					ST GILES - BAYTOWN INC			
107 KARLA DR					2203 KILGORE ROAD			
LUFKIN		TX	75901		BAYTOWN TX		77520	
Phone	(936) 275-3466	Fax	(936) 275-9732		PHONE:	(281) 837-1942	FAX:	(281) 427-0586
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		09/01/2017
County	ANGELINA		Reg Svcs:	REGION 5 ICF/IID		Region	05 - BEAUMONT	
Facility Information:		Facility ID:	007103		<u>Owner Information</u>			
LUFKIN STATE SUPPORTED LIVING CENTER					DADS			
HWY 69 N					PO BOX 12668			
LUFKIN		TX	75901		AUSTIN TX		78711	
Phone	(936) 853-8350	Fax	(956) 853-8521		PHONE:	(512) 454-3761	FAX:	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		486
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		
County	ANGELINA		Reg Svcs:	REGION 5 ICF/IID		Region	05 - BEAUMONT	
Facility Information:		Facility ID:	007406		<u>Owner Information</u>			
MARKUS HOUSE					ST GILES LIVING CENTERS INC			
912 MARKUS					2007 HOWARD STREET			
LUFKIN		TX	75901		LUFKIN TX		75901	
Phone	(936) 639-1615	Fax	(936) 639-1632		PHONE:	(936) 639-1610	FAX:	(936) 639-1632
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		09/01/2017
County	ANGELINA		Reg Svcs:	REGION 5 ICF/IID		Region	05 - BEAUMONT	
Facility Information:		Facility ID:	003869		<u>Owner Information</u>			
SOUTHWOOD COMMUNITY HOME					EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
1500 SOUTHWOOD					9901 LINN STATION ROAD			
LUFKIN		TX	75904		LOUISVILLE KY		40223-3808	
Phone	(409) 639-6906	Fax	(936) 639-5063		PHONE:	(502) 394-2100	FAX:	(502) 394-2285
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/01/2017
County	ANGELINA		Reg Svcs:	REGION 5 ICF/IID		Region	05 - BEAUMONT	
Facility Information:		Facility ID:	003898		<u>Owner Information</u>			
STECHER COMMUNITY HOME					EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
702 MARION ST					9901 LINN STATION ROAD			
LUFKIN		TX	75904		LOUISVILLE KY		40223-3808	
Phone	(936) 639-6998	Fax			PHONE:	(502) 394-2100	FAX:	(502) 394-2285
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/01/2017
County	ANGELINA		Reg Svcs:	REGION 5 ICF/IID		Region	05 - BEAUMONT	
Facility Information:		Facility ID:	003862		<u>Owner Information</u>			
WESTSIDE COMMUNITY HOME					EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
6895 FM 3150					9901 LINN STATION ROAD			
LUFKIN		TX	75904		LOUISVILLE KY		40223-3808	
Phone	(936) 639-1575	Fax	(936) 639-5063		PHONE:	(502) 394-2100	FAX:	(502) 394-2285
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		09/23/2018

County	ANGELINA			Reg Svcs:	REGION 5 ICF/IID			Region	05 - BEAUMONT		
Facility Information:		Facility ID:	003899				<u>Owner Information</u>				
WHITE DOVE COMMUNITY HOME						EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP					
462 WHITE DOVE DRIVE						9901 LINN STATION ROAD					
LUFKIN		TX	75904-9798				LOUISVILLE	KY	40223-3808		
Phone	(936) 824-4422		Fax			PHONE:		(502) 394-2100		FAX:	(502) 394-2285
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:		ICF/IID
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/01/2017			
County	ARANSAS			Reg Svcs:	CORPUS CHRISTI 61			Region	11 - CORPUS CHRISTI		
Facility Information:		Facility ID:	007816				<u>Owner Information</u>				
ABILITY HOUSE ROCKPORT						ABILITY HOUSE LTD					
843 PINE AVE						711 SENTRY HILL					
ROCKPORT		TX	78382				SAN ANTONIO	TX	78260		
Phone	(361) 729-7393		Fax			PHONE:		(210) 255-1718		FAX:	(210) 255-1035
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:		ICF/IID
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/06/2018			
County	ARCHER			Reg Svcs:	ICF/IID			Region	02 - ABILENE		
Facility Information:		Facility ID:	003797				<u>Owner Information</u>				
OUACHITA ACRES						D & S RESIDENTIAL SERVICES LP					
7752 STATE HWY 79 SOUTH						8911 N CAPITAL OF TX HWY		,BLDG 1		STE 1300	
WICHITA FALLS		TX	76310				AUSTIN	TX	78759		
Phone	(940) 692-6282		Fax	(512) 327-5355		PHONE:		(512) 327-2325		FAX:	(512) 327-5355
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		13	PROGRAM TYPE:		ICF/IID
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		12/01/2017			
County	AUSTIN			Reg Svcs:	UNIT 21 (ICF/MR)			Region	06 - HOUSTON		
Facility Information:		Facility ID:	007270				<u>Owner Information</u>				
BELLVILLE COMMUNITY RESIDENCE						RESCARE SERVICES INC					
305 S THOMAS ST						3711 SAN ANTONIO ST					
BELLVILLE		TX	77418				AUSTIN	TX	78734-2126		
Phone	(979) 865-8112		Fax	(979) 865-8112		PHONE:		(512) 328-1832		FAX:	(512) 328-1833
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:		ICF/IID
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		04/30/2018			
County	BASTROP			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:		Facility ID:	003762				<u>Owner Information</u>				
BASTROP COMMUNITY RESIDENCE						RESCARE SERVICES INC					
133 PLUM ST						3711 SAN ANTONIO ST					
BASTROP		TX	78602				AUSTIN	TX	78734-2126		
Phone	(512) 321-3316		Fax	(512) 321-3316		PHONE:		(512) 328-1832		FAX:	(512) 328-1833
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		8	PROGRAM TYPE:		ICF/IID
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		02/02/2018			
County	BASTROP			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:		Facility ID:	007634				<u>Owner Information</u>				
JEFFERSON COMMUNITY RESIDENCE						RESCARE SERVICES INC					
1405 JEFFERSON ST						3711 SAN ANTONIO ST					
BASTROP		TX	78602				AUSTIN	TX	78734-2126		
Phone	(512) 303-7638		Fax			PHONE:		(512) 328-1832		FAX:	(512) 328-1833
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:		ICF/IID
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		11/22/2018			

County	BASTROP		Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007635		Owner Information			
LAKEVIEW COMMUNITY RESIDENCE				RESCARE SERVICES INC				
223 MATTHEW COVE				3711 SAN ANTONIO ST				
BASTROP		TX	78602		AUSTIN		TX	78734-2126
Phone	(512) 303-6758		Fax			PHONE:	(512) 328-1832	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:	6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:	ICF/IID	
PRIVATE Beds:		0	TITLE 18/19:		0	LICENSE Exp Dt:	11/21/2018	
County	BASTROP		Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	003991		Owner Information			
SMITHVILLE COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED				
602 HICKORY				33 CYPRESS BLVD				
SMITHVILLE		TX	78957		ROUND ROCK		TX	78665
Phone	(512) 237-3715		Fax	(979) 968-6598		PHONE:	(512) 336-0800	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:	6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:	ICF/IID	
PRIVATE Beds:		0	TITLE 18/19:		0	LICENSE Exp Dt:	03/15/2018	
County	BELL		Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007659		Owner Information			
LITTLE FLOCK ROAD I COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP				
5704 LITTLE FLOCK RD				9901 LINN STATION ROAD				
TEMPLE		TX	76501-7120		LOUISVILLE		KY	40223-3808
Phone	(254) 773-4553		Fax			PHONE:	(502) 394-2100	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:	13	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:	ICF/IID	
PRIVATE Beds:		0	TITLE 18/19:		0	LICENSE Exp Dt:	01/01/2017	
County	BELL		Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	003842		Owner Information			
LITTLE FLOCK ROAD I I COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP				
5704 LITTLE FLOCK RD				9901 LINN STATION ROAD				
TEMPLE		TX	76501-7120		LOUISVILLE		KY	40223-3808
Phone	(254) 773-2899		Fax			PHONE:	(502) 394-2100	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:	13	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:	ICF/IID	
PRIVATE Beds:		0	TITLE 18/19:		0	LICENSE Exp Dt:	01/01/2017	
County	BELL		Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007459		Owner Information			
PROSPECT COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP				
1805 CANYON CREEK DRIVE				9901 LINN STATION ROAD				
TEMPLE		TX	76502-3210		LOUISVILLE		KY	40223-3808
Phone	(254) 773-4173		Fax			PHONE:	(502) 394-2100	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:	6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:	ICF/IID	
PRIVATE Beds:		0	TITLE 18/19:		0	LICENSE Exp Dt:	01/01/2019	
County	BELL		Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007219		Owner Information			
TAYLORS COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP				
221 TAYLORS DR				9901 LINN STATION ROAD				
TEMPLE		TX	76502		LOUISVILLE		KY	40223-3808
Phone	(254) 773-6700		Fax			PHONE:	(502) 394-2100	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:	6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:	ICF/IID	
PRIVATE Beds:		0	TITLE 18/19:		0	LICENSE Exp Dt:	01/01/2019	

County	BELL	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:		Facility ID:	007220	Owner Information	
TRENTON HOUSE				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
3220 TRENTON DRIVE				9901 LINN STATION ROAD	
TEMPLE		TX	76504	LOUISVILLE KY 40223-3808	
Phone	(254) 773-2212	Fax		PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2019
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:		Facility ID:	007376	Owner Information	
COUNCIL OAKS @ MISTY RIDGE				COUNCIL OAKS COMMUNITY OPTIONS LTD	
7005 MISTY RIDGE				11901 TOEPPERWEIN ,STE 1001	
CONVERSE		TX	78109	SAN ANTONIO TX 78233	
Phone	(210) 564-0317	Fax	(210) 590-9503	PHONE:	(210) 646-0717 FAX: (210) 599-9789
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	05/01/2018
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:		Facility ID:	007318	Owner Information	
COUNCIL OAKS AT NUGGET CREEK				COUNCIL OAKS COMMUNITY OPTIONS LTD	
10022 NUGGET CREEK				11901 TOEPPERWEIN ,STE 1001	
CONVERSE		TX	78109	SAN ANTONIO TX 78233	
Phone	(210) 945-9124	Fax		PHONE:	(210) 646-0717 FAX: (210) 599-9789
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	11/01/2017
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:		Facility ID:	003652	Owner Information	
COUNCIL OAKS AT TROUT RIDGE				COUNCIL OAKS COMMUNITY OPTIONS LTD	
10026 TROUT RIDGE				11901 TOEPPERWEIN ,STE 1001	
CONVERSE		TX	78109	SAN ANTONIO TX 78233	
Phone	(210) 590-3909	Fax		PHONE:	(210) 646-0717 FAX: (210) 599-9789
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	11/01/2017
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:		Facility ID:	104463	Owner Information	
COUNCIL OAKS FLATLAND TRAIL				COUNCIL OAKS COMMUNITY OPTIONS LTD	
10304 FLATLAND TRAIL				11901 TOEPPERWEIN ,STE 1001	
CONVERSE		TX	78109	SAN ANTONIO TX 78233	
Phone	(210) 659-9553	Fax	(210) 599-9789	PHONE:	(210) 646-0717 FAX: (210) 599-9789
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/17/2018
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:		Facility ID:	101821	Owner Information	
SPRUCE RIDGE				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
10026 SPRUCE RIDGE DR				9901 LINN STATION RD	
CONVERSE		TX	78109	LOUISVILLE KY 40223	
Phone	(210) 590-1348	Fax		PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	11/01/2017

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	007601	<b>Owner Information</b>	
10115 CEDARMONT				CALAB INC	
10115 CEDARMONT				3803 S ROBINSON RD	
SAN ANTONIO		<b>TX</b>	78245	GRAND PRAIRIE TX 75052-1239	
<b>Phone</b>	(210) 520-2539	<b>Fax</b>	(210) 647-7637	<b>PHONE:</b>	(972) 263-2112
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	05/04/2018
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	007602	<b>Owner Information</b>	
11311 MORINO PARK				CALAB INC	
11311 MORINO PARK				3803 S ROBINSON RD	
SAN ANTONIO		<b>TX</b>	78249	GRAND PRAIRIE TX 75052-1239	
<b>Phone</b>	(210) 694-4418	<b>Fax</b>	(210) 647-7637	<b>PHONE:</b>	(972) 263-2112
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	05/05/2018
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	007347	<b>Owner Information</b>	
7123 SPRING MORNING				CALAB INC	
7123 SPRING MORNING				3803 S ROBINSON RD	
SAN ANTONIO		<b>TX</b>	78249	GRAND PRAIRIE TX 75052-1239	
<b>Phone</b>	(210) 690-3258	<b>Fax</b>	(210) 647-7637	<b>PHONE:</b>	(972) 263-2112
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	09/01/2017
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	007600	<b>Owner Information</b>	
9519 AUTUMN BREEZE				CALAB INC	
9519 AUTUMN BREEZE				3803 S ROBINSON RD	
SAN ANTONIO		<b>TX</b>	78250	GRAND PRAIRIE TX 75052-1239	
<b>Phone</b>	(210) 520-0561	<b>Fax</b>	(210) 647-7637	<b>PHONE:</b>	(972) 263-2112
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	05/03/2018
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	007253	<b>Owner Information</b>	
APRICOT				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
12126 APRICOT				9901 LINN STATION RD	
SAN ANTONIO		<b>TX</b>	78247	LOUISVILLE KY 40223	
<b>Phone</b>	(210) 545-1581	<b>Fax</b>		<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	12/01/2018
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	007216	<b>Owner Information</b>	
ARBOR WOOD				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
9035 ARBORWOOD				9901 LINN STATION RD	
SAN ANTONIO		<b>TX</b>	78250	LOUISVILLE KY 40223	
<b>Phone</b>	(210) 681-5334	<b>Fax</b>		<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	11/20/2017

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	007349	<b>Owner Information</b>	
AUTISTIC TREATMENT CENTER WADDES DON WOOD				AUTISTIC TREATMENT CENTER INC	
6307 WADDES DON WOOD				10503 METRIC DR	
SAN ANTONIO		<b>TX</b>	78233		
<b>Phone</b>	(210) 590-2107	<b>Fax</b>	(210) 590-3143	<b>DALLAS</b>	<b>TX</b> 75243
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PHONE:</b>	(972) 644-2076
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	12/18/2017
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	010179	<b>Owner Information</b>	
BOULDER CREEK				AUTISTIC TREATMENT CENTER INC	
15618 BOULDER CREEK				10503 METRIC DR	
SAN ANTONIO		<b>TX</b>	78247		
<b>Phone</b>	(210) 590-2107	<b>Fax</b>	(210) 590-3143	<b>DALLAS</b>	<b>TX</b> 75243
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PHONE:</b>	(972) 644-2076
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	07/12/2017
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	101793	<b>Owner Information</b>	
BOULDER OAKS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
14038 BOULDER OAKS				9901 LINN STATION RD	
SAN ANTONIO		<b>TX</b>	78247		
<b>Phone</b>	(210) 490-4656	<b>Fax</b>		<b>LOUISVILLE</b>	<b>KY</b> 40223
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PHONE:</b>	(502) 394-2100
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	11/01/2017
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	003668	<b>Owner Information</b>	
BOULDER OAKS				REACHING MAXIMUM INDEPENDENCE INC	
14022 BOULDER OAKS				6336 MONTGOMERY DR	
SAN ANTONIO		<b>TX</b>	78247		
<b>Phone</b>	(210) 494-4915	<b>Fax</b>		<b>SAN ANTONIO</b>	<b>TX</b> 78239
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PHONE:</b>	(210) 656-6674
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	04/29/2018
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	007409	<b>Owner Information</b>	
BREES				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
222 BREES				9901 LINN STATION RD	
SAN ANTONIO		<b>TX</b>	78209		
<b>Phone</b>	(210) 820-3712	<b>Fax</b>		<b>LOUISVILLE</b>	<b>KY</b> 40223
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PHONE:</b>	(502) 394-2100
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	12/01/2018
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	007487	<b>Owner Information</b>	
CADES COVE HOUSE				COMPLETE LIFE CARE	
6647 CADES COVE				6647 CADES COVE	
SAN ANTONIO		<b>TX</b>	78238		
<b>Phone</b>	(210) 520-0774	<b>Fax</b>	(210) 520-7260	<b>SAN ANTONIO</b>	<b>TX</b> 78238
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PHONE:</b>	(210) 520-0774
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	12/03/2017



County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007348		<u>Owner Information</u>			
CHISOLM TRAIL					EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
2815 CHISOLM TRL					9901 LINN STATION RD			
SAN ANTONIO		TX	78217		LOUISVILLE		KY	40223
Phone	(210) 820-3650		Fax			PHONE:	(502) 394-2100	
TOTAL Lic Capacity:		0	TITLE 18:		0	FAX:		(502) 394-2285
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0	SERVICE TYPE		PRIVATELY OWNED
					License Exp Dt:		12/01/2018	
County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	003933		<u>Owner Information</u>			
CONSTITUTION COMMUNITY HOME					EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
12319 CONSTITUTION ST					9901 LINN STATION ROAD			
SAN ANTONIO		TX	78233-5206		LOUISVILLE		KY	40223-3808
Phone	(210) 590-9338		Fax			PHONE:	(502) 394-2100	
TOTAL Lic Capacity:		0	TITLE 18:		0	FAX:		(502) 394-2285
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0	SERVICE TYPE		PRIVATELY OWNED
					License Exp Dt:		01/01/2019	
County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007553		<u>Owner Information</u>			
COUNCIL OAKS AT ALMARION WAY					COUNCIL OAKS COMMUNITY OPTIONS LTD			
9430 ALMARION WAY					11901 TOEPPERWEIN			
SAN ANTONIO		TX	78250		SAN ANTONIO		TX	,STE 1001
Phone	(210) 684-7510		Fax	(512) 346-4125		78233		
TOTAL Lic Capacity:		0	TITLE 18:		0	PHONE:		(210) 646-0717
Cert Alzh Capacity:		0	TITLE19:		0	FAX:		(210) 599-9789
PRIVATE Beds:		0	TITLE 18/19:		0	PROGRAM TYPE:		ICF/IID
					License Exp Dt:		11/01/2017	
County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	003698		<u>Owner Information</u>			
COUNCIL OAKS AT BEECH TRAIL					COUNCIL OAKS COMMUNITY OPTIONS LTD			
7031 BEECH TRAIL					11901 TOEPPERWEIN			
SAN ANTONIO		TX	78244		SAN ANTONIO		TX	,STE 1001
Phone	(210) 666-1224		Fax			78233		
TOTAL Lic Capacity:		0	TITLE 18:		0	PHONE:		(210) 646-0717
Cert Alzh Capacity:		0	TITLE19:		0	FAX:		(210) 599-9789
PRIVATE Beds:		0	TITLE 18/19:		0	PROGRAM TYPE:		ICF/IID
					License Exp Dt:		11/01/2017	
County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	003844		<u>Owner Information</u>			
COUNCIL OAKS AT CHERRY GLADE					COUNCIL OAKS COMMUNITY OPTIONS LTD			
8303 CHERRY GLADE					11901 TOEPPERWEIN			
SAN ANTONIO		TX	78244		SAN ANTONIO		TX	,STE 1001
Phone	(210) 658-9288		Fax	(210) 599-9789		78233		
TOTAL Lic Capacity:		0	TITLE 18:		0	PHONE:		(210) 646-0717
Cert Alzh Capacity:		0	TITLE19:		0	FAX:		(210) 599-9789
PRIVATE Beds:		0	TITLE 18/19:		0	PROGRAM TYPE:		ICF/IID
					License Exp Dt:		02/01/2018	
County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007234		<u>Owner Information</u>			
COUNCIL OAKS AT CLOUDY RIDGE					COUNCIL OAKS COMMUNITY OPTIONS LTD			
6124 CLOUDY RIDGE					11901 TOEPPERWEIN			
SAN ANTONIO		TX	78247		SAN ANTONIO		TX	,STE 1001
Phone	(210) 637-6506		Fax			78233		
TOTAL Lic Capacity:		0	TITLE 18:		0	PHONE:		(210) 646-0717
Cert Alzh Capacity:		0	TITLE19:		0	FAX:		(210) 599-9789
PRIVATE Beds:		0	TITLE 18/19:		0	PROGRAM TYPE:		ICF/IID
					License Exp Dt:		11/01/2017	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	007466	<b>Owner Information</b>	
COUNCIL OAKS AT COUNTRY CROSS				COUNCIL OAKS COMMUNITY OPTIONS LTD	
6815 COUNTRY CROSS				11901 TOEPPERWEIN ,STE 1001	
SAN ANTONIO		<b>TX</b>	78240	SAN ANTONIO TX 78233	
<b>Phone</b>	(210) 697-9760	<b>Fax</b>		<b>PHONE:</b>	(210) 646-0717
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>FAX:</b>	(210) 599-9789
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	11/01/2017
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	007337	<b>Owner Information</b>	
COUNCIL OAKS AT SHALLOW CREEK				COUNCIL OAKS COMMUNITY OPTIONS LTD	
8211 SHALLOW CREEK				11901 TOEPPERWEIN ,STE 1001	
SAN ANTONIO		<b>TX</b>	78251	SAN ANTONIO TX 78233	
<b>Phone</b>	(210) 680-2778	<b>Fax</b>		<b>PHONE:</b>	(210) 646-0717
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>FAX:</b>	(210) 599-9789
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	11/01/2017
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	007546	<b>Owner Information</b>	
COUNCIL OAKS AT SHALLOW RIDGE				COUNCIL OAKS COMMUNITY OPTIONS LTD	
8722 SHALLOW RIDGE				11901 TOEPPERWEIN ,STE 1001	
SAN ANTONIO		<b>TX</b>	78239	SAN ANTONIO TX 78233	
<b>Phone</b>	(210) 590-2912	<b>Fax</b>		<b>PHONE:</b>	(210) 646-0717
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>FAX:</b>	(210) 599-9789
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	11/01/2017
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	003816	<b>Owner Information</b>	
COVENANT HOME				MISSION ROAD DEVELOPMENTAL CENTER	
131 BURR RD				8706 MISSION RD	
SAN ANTONIO		<b>TX</b>	78209	SAN ANTONIO TX 78214	
<b>Phone</b>	(210) 828-1424	<b>Fax</b>	(210) 828-1246	<b>PHONE:</b>	(210) 334-2437
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>FAX:</b>	(210) 922-6006
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	10/03/2018
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	007558	<b>Owner Information</b>	
CRATER LAKE HOME				BEXAR COUNTY HOME CARE INC	
5707 CRATER LAKE				PO BOX 100347	
SAN ANTONIO		<b>TX</b>	78244	SAN ANTONIO TX 78201	
<b>Phone</b>	(210) 447-7233	<b>Fax</b>	(210) 661-2620	<b>PHONE:</b>	(210) 661-6262
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>FAX:</b>	(210) 661-2620
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	04/08/2017
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	007214	<b>Owner Information</b>	
CYPRESS HOLLOW				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
13811 CYPRESS HOLLOW				9901 LINN STATION RD	
SAN ANTONIO		<b>TX</b>	78232	LOUISVILLE KY 40223	
<b>Phone</b>	(210) 491-0903	<b>Fax</b>		<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>FAX:</b>	(502) 394-2285
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	12/01/2018

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>	<b>Facility ID:</b> 007449	<b>Owner Information</b>			
DAWNWOOD		R & K SPECIALIZED HOMES INC			
8358 DAWNWOOD		1550 NE LOOP 410 ,STE 206			
SAN ANTONIO	TX 78250	SAN ANTONIO TX 78209			
<b>Phone</b> (210) 521-5253	<b>Fax</b>	<b>PHONE:</b> (210) 805-0802 <b>FAX:</b> (210) 805-0744			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 08/05/2018			
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>	<b>Facility ID:</b> 104356	<b>Owner Information</b>			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
3015 FALL WAY		9901 LINN STATION RD			
SAN ANTONIO	TX 78247	LOUISVILLE KY 40223			
<b>Phone</b> (210) 499-1282	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 03/03/2017			
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>	<b>Facility ID:</b> 104357	<b>Owner Information</b>			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
2114 OAK CREEK		9901 LINN STATION RD			
SAN ANTONIO	TX 78232	LOUISVILLE KY 40223			
<b>Phone</b> (210) 491-4448	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 04/14/2017			
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>	<b>Facility ID:</b> 104350	<b>Owner Information</b>			
EDUCARE COMMUNITY LIVING CORPORATION-TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
2531 GREAT OAKS DRIVE		9901 LINN STATION RD			
SAN ANTONIO	TX 78232	LOUISVILLE KY 40223			
<b>Phone</b> (210) 491-5977	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 12/09/2018			
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>	<b>Facility ID:</b> 104351	<b>Owner Information</b>			
EDUCARE COMMUNITY LIVING CORPORATION-TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
3003 PEBBLE TRAIL		9901 LINN STATION RD			
SAN ANTONIO	TX 78232	LOUISVILLE KY 40223			
<b>Phone</b> (210) 494-4560	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 05/11/2017			
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>	<b>Facility ID:</b> 003718	<b>Owner Information</b>			
EISENHAUER GROUP HOME		BEXAR CO BOARD OF TRUSTEES MHMR SVCS DBA THE CTR FOR HC SVCS			
2927 EISENHAUER ROAD		3031 IH 10 WEST			
SAN ANTONIO	TX 78209	SAN ANTONIO TX 78201			
<b>Phone</b> (210) 659-5857	<b>Fax</b>	<b>PHONE:</b> <b>FAX:</b>			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 10			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> GOVERNMENT BASED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b>			

County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:		007208		<u>Owner Information</u>			
EL DORADO ADULT LIVING CENTER						SPECIALIZED HOME LIFE			
12302 GRAN VISTA						PO BOX 33487			
SAN ANTONIO		TX	78233			SAN ANTONIO		TX	78265
Phone	(210) 599-8656	Fax	(210) 599-8656			PHONE:		(210) 599-8656	FAX: (210) 599-8656
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		10/26/2017	
County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:		003662		<u>Owner Information</u>			
ENCINO VALLEY						EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
1906 ENCINO VALLEY						9901 LINN STATION RD			
SAN ANTONIO		TX	78259			LOUISVILLE		KY	40223
Phone	(210) 497-8162	Fax				PHONE:		(502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		04/20/2018	
County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:		007415		<u>Owner Information</u>			
FEATHER RIDGE						SOUTH TEXAS COMMUNITY LIVING CORP			
13055 FEATHER RIDGE						18 AUGUSTA PINES DR		,STE 140 E	
SAN ANTONIO		TX	78233			SPRING		TX	77389
Phone	(210) 599-8965	Fax	(210) 494-7228			PHONE:		(281) 351-1758	FAX: (210) 255-4500
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		03/01/2018	
County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:		007467		<u>Owner Information</u>			
FLORAL WAY COMMUNITY HOME						SOUTH TEXAS COMMUNITY LIVING CORP			
2934 FLORAL WAY						18 AUGUSTA PINES DR		,STE 140 E	
SAN ANTONIO		TX	78247			SPRING		TX	77389
Phone	(210) 402-1267	Fax	(210) 494-7228			PHONE:		(281) 351-1758	FAX: (210) 255-4500
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		03/01/2018	
County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:		007400		<u>Owner Information</u>			
FOREST NIGHT HOME						BEXAR COUNTY HOME CARE INC			
11209 FOREST NIGHT						PO BOX 100347			
SAN ANTONIO		TX	78233			SAN ANTONIO		TX	78201
Phone	(210) 599-7441	Fax	(210) 661-2620			PHONE:		(210) 661-6262	FAX: (210) 661-2620
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		05/01/2018	
County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:		007438		<u>Owner Information</u>			
FOUNTAIN LAKE						SOUTH TEXAS COMMUNITY LIVING CORP			
5227 FOUNTAIN LAKE						18 AUGUSTA PINES DR		,STE 140 E	
SAN ANTONIO		TX	78244			SPRING		TX	77389
Phone	(210) 662-7076	Fax	(210) 494-7228			PHONE:		(281) 351-1758	FAX: (210) 255-4500
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		03/01/2018	

County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	101796		<u>Owner Information</u>			
GRANADA					EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
106 GRANADA					9901 LINN STATION RD			
SAN ANTONIO		TX	78216		LOUISVILLE	KY	40223	
Phone	(210) 438-9338	Fax	(210) 558-9791		PHONE:	(502) 394-2100	FAX:	(502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6			
Cert Alzh Capacity:	0	TITLE19:	0					
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 11/01/2017				
County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007364		<u>Owner Information</u>			
GREEN RUN					EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
2947 GREEN RUN					9901 LINN STATION RD			
SAN ANTONIO		TX	78231-1612		LOUISVILLE	KY	40223	
Phone	(210) 493-9079	Fax			PHONE:	(502) 394-2100	FAX:	(502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6			
Cert Alzh Capacity:	0	TITLE19:	0					
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 01/30/2018				
County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007399		<u>Owner Information</u>			
HALCYON IN THE HEIGHTS					R & K SPECIALIZED HOMES INC			
236 HALCYON					1550 NE LOOP 410			
SAN ANTONIO		TX	78209		SAN ANTONIO TX		78209	,STE 206
Phone	(210) 805-0885	Fax	(210) 805-0744		PHONE:	(210) 805-0802	FAX:	(210) 805-0744
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6			
Cert Alzh Capacity:	0	TITLE19:	0					
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 04/29/2018				
County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007465		<u>Owner Information</u>			
HATHAWAY HOME					BEXAR COUNTY HOME CARE INC			
211 W HATHAWAY					PO BOX 100347			
SAN ANTONIO		TX	78209		SAN ANTONIO TX		78201	
Phone	(210) 822-7829	Fax	(210) 661-2620		PHONE:	(210) 661-6262	FAX:	(210) 661-2620
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6			
Cert Alzh Capacity:	0	TITLE19:	0					
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 09/22/2017				
County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007256		<u>Owner Information</u>			
HEREFORD HOUSE					AUTISTIC TREATMENT CENTER INC			
14433 HEREFORD					10503 METRIC DR			
SAN ANTONIO		TX	78217		DALLAS TX		75243	
Phone	(210) 590-2107	Fax	(210) 590-3143		PHONE:	(972) 644-2076	FAX:	(972) 644-5650
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6			
Cert Alzh Capacity:	0	TITLE19:	0					
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 03/14/2018				
County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007461		<u>Owner Information</u>			
HILLSIDE RIDGE HOUSE					GROWING CAPABILITIES INC			
14727 HILLSIDE RIDGE					18 AUGUSTA PINES STE 140E			
SAN ANTONIO		TX	78233		SPRING TX		77389	
Phone	(210) 590-9151	Fax	(210) 494-7228		PHONE:	(281) 351-1758	FAX:	(281) 255-4500
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6			
Cert Alzh Capacity:	0	TITLE19:	0					
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 09/12/2017				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>	<b>Facility ID:</b> 007207	<b>Owner Information</b>			
HUNTERS CIRCLE		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
13230 N HUNTERS CIR		9901 LINN STATION RD			
SAN ANTONIO	TX 78230	LOUISVILLE KY 40223			
<b>Phone</b> (210) 493-5968	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED		
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>License Exp Dt:</b> 10/25/2017		
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0				
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>	<b>Facility ID:</b> 007215	<b>Owner Information</b>			
INTRIGUE HOUSE		R & K SPECIALIZED HOMES INC			
11619 INTRIGUE		1550 NE LOOP 410 ,STE 206			
SAN ANTONIO	TX 78216	SAN ANTONIO TX 78209			
<b>Phone</b> (210) 979-0382	<b>Fax</b> (210) 979-0382	<b>PHONE:</b> (210) 805-0802 <b>FAX:</b> (210) 805-0744			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED		
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>License Exp Dt:</b> 11/20/2017		
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0				
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>	<b>Facility ID:</b> 007527	<b>Owner Information</b>			
KNOB OAK		KNOB OAK INC			
9714 KNOB OAK		9714 KNOB OAK			
SAN ANTONIO	TX 78250	SAN ANTONIO TX 78250			
<b>Phone</b> (210) 680-6768	<b>Fax</b> (210) 520-0812	<b>PHONE:</b> (210) 690-6768 <b>FAX:</b> (210) 520-0812			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED		
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>License Exp Dt:</b> 01/01/2019		
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0				
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>	<b>Facility ID:</b> 007499	<b>Owner Information</b>			
KOPFLOW HOME		MISSION ROAD DEVELOPMENTAL CENTER			
460 KOPFLOW		8706 MISSION RD			
SAN ANTONIO	TX 78221	SAN ANTONIO TX 78214			
<b>Phone</b> (210) 921-9396	<b>Fax</b> (210) 924-9265	<b>PHONE:</b> (210) 334-2437 <b>FAX:</b> (210) 922-6006			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED		
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>License Exp Dt:</b> 01/21/2018		
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0				
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>	<b>Facility ID:</b> 007435	<b>Owner Information</b>			
LAKE SUNSET COURT		SOUTH TEXAS COMMUNITY LIVING CORP			
3507 LAKE SUNSET CT		18 AUGUSTA PINES DR ,STE 140 E			
SAN ANTONIO	TX 78217	SPRING TX 77389			
<b>Phone</b> (210) 656-2106	<b>Fax</b> (210) 494-7228	<b>PHONE:</b> (281) 351-1758 <b>FAX:</b> (210) 255-4500			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED		
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>License Exp Dt:</b> 03/01/2018		
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0				
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>	<b>Facility ID:</b> 106203	<b>Owner Information</b>			
LAKEWAY		SOUTH TEXAS COMMUNITY LIVING CORP			
4417 LAKEWAY		18 AUGUSTA PINES DR ,STE 140 E			
SAN ANTONIO	TX 78244	SPRING TX 77389			
<b>Phone</b> (210) 662-5920	<b>Fax</b> (210) 494-7228	<b>PHONE:</b> (281) 351-1758 <b>FAX:</b> (210) 255-4500			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED		
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>License Exp Dt:</b> 05/27/2017		
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0				

County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:		003935		<u>Owner Information</u>			
LAMBETH COMMUNITY HOME						EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
4935 LAMBETH ST						9901 LINN STATION ROAD			
SAN ANTONIO		TX	78228			LOUISVILLE		KY	40223-3808
Phone	(210) 509-9938	Fax				PHONE:		(502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		10/20/2017	
County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:		007458		<u>Owner Information</u>			
LARIMER SQUARE						EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
6006 LARIMER SQ						9901 LINN STATION RD			
SAN ANTONIO		TX	78249			LOUISVILLE		KY	40223
Phone	(210) 561-0303	Fax				PHONE:		(502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		11/01/2017	
County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:		003775		<u>Owner Information</u>			
MABEE HOME						MISSION ROAD DEVELOPMENTAL CENTER			
7520 S SEA LN						8706 MISSION RD			
SAN ANTONIO		TX	78216			SAN ANTONIO		TX	78214
Phone	(210) 377-1328	Fax		(210) 377-1328		PHONE:		(210) 334-2437	FAX: (210) 922-6006
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		12	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		10/22/2017	
County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:		003629		<u>Owner Information</u>			
MAYFAIR						REACHING MAXIMUM INDEPENDENCE INC			
3118 MAYFAIR						6336 MONTGOMERY DR			
SAN ANTONIO		TX	78217			SAN ANTONIO		TX	78239
Phone	(210) 655-8323	Fax		(210) 656-0199		PHONE:		(210) 656-6674	FAX: (210) 656-0199
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		11/01/2017	
County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:		007292		<u>Owner Information</u>			
MOCKINGBIRD HOME						MISSION ROAD DEVELOPMENTAL CENTER			
7618 MOCKINGBIRD LN						8706 MISSION RD			
SAN ANTONIO		TX	78229-2624			SAN ANTONIO		TX	78214
Phone	(210) 349-8125	Fax		(210) 349-8149		PHONE:		(210) 334-2437	FAX: (210) 922-6006
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		07/18/2018	
County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:		003630		<u>Owner Information</u>			
NEW WORLD						REACHING MAXIMUM INDEPENDENCE INC			
7950 NEW WORLD						6336 MONTGOMERY DR			
SAN ANTONIO		TX	78239			SAN ANTONIO		TX	78239
Phone	(210) 646-8628	Fax		(210) 656-0199		PHONE:		(210) 656-6674	FAX: (210) 656-0199
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		12/05/2017	

County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	104625		<u>Owner Information</u>				
OASIS HOME					WHITBY ROAD ALLIANCE INC				
6487 WHITBY RD					6487 WHITBY RD				
SAN ANTONIO		TX	78240					78240-2198	
Phone	(210) 696-2410		Fax	(210) 699-1866					
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:	8		
Cert Alzh Capacity:		0	TITLE19:		0			PROGRAM TYPE:	ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0			SERVICE TYPE	PRIVATELY OWNED
						License Exp Dt:	08/10/2017		
County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007365		<u>Owner Information</u>				
PARK HAVEN HOME					BEXAR COUNTY HOME CARE INC				
6738 PARK HAVEN					PO BOX 100347				
SAN ANTONIO		TX	78244					78201	
Phone	(210) 661-1338		Fax	(210) 661-2620					
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:	6		
Cert Alzh Capacity:		0	TITLE19:		0			PROGRAM TYPE:	ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0			SERVICE TYPE	PRIVATELY OWNED
						License Exp Dt:	01/31/2018		
County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	003649		<u>Owner Information</u>				
PEBBLE BOW					EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				
2643 PEBBLE BOW					9901 LINN STATION RD				
SAN ANTONIO		TX	78232					40223	
Phone	(210) 491-0610		Fax						
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:	6		
Cert Alzh Capacity:		0	TITLE19:		0			PROGRAM TYPE:	ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0			SERVICE TYPE	PRIVATELY OWNED
						License Exp Dt:	03/01/2018		
County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	003603		<u>Owner Information</u>				
PEPPERIDGE ADULT LIVING CENTER					SPECIALIZED HOME LIFE				
4611 WETZ					PO BOX 33487				
SAN ANTONIO		TX	78217					78265	
Phone	(210) 599-8656		Fax						
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:	6		
Cert Alzh Capacity:		0	TITLE19:		0			PROGRAM TYPE:	ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0			SERVICE TYPE	PRIVATELY OWNED
						License Exp Dt:	06/01/2018		
County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007508		<u>Owner Information</u>				
QUAIL RUN					COMPLETE LIFE CARE				
7422 QUAIL RUN					6647 CADES COVE				
SAN ANTONIO		TX	78209					78238	
Phone	(210) 805-8950		Fax	(210) 520-7260					
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:	6		
Cert Alzh Capacity:		0	TITLE19:		0			PROGRAM TYPE:	ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0			SERVICE TYPE	PRIVATELY OWNED
						License Exp Dt:	02/05/2018		
County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	104491		<u>Owner Information</u>				
R & K SPECIALIZED HOMES INC					R & K SPECIALIZED HOMES INC				
15910 QUAIL CIRCLE					1550 NE LOOP 410 ,STE 206				
SAN ANTONIO		TX	78247					78209	
Phone	(210) 805-0802		Fax	(210) 805-0744					
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:	6		
Cert Alzh Capacity:		0	TITLE19:		0			PROGRAM TYPE:	ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0			SERVICE TYPE	PRIVATELY OWNED
						License Exp Dt:	11/23/2018		



County	BEXAR	Reg Svcs:	IID (AUSTIN REGION)	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	007564	<b>Owner Information</b>	
R & K SPECIALIZED HOMES INC				R & K SPECIALIZED HOMES INC	
6706 TIMBERHILL				1550 NE LOOP 410	
SAN ANTONIO				,STE 206	
		<b>TX</b>	78238		
<b>Phone</b>		(210) 805-0802	<b>Fax</b>	(210) 805-0744	
<b>TOTAL Lic Capacity:</b>		0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b> 6
<b>Cert Alzh Capacity:</b>		0	<b>TITLE19:</b>	0	
<b>PRIVATE Beds:</b>		0	<b>TITLE 18/19:</b>	0	
				<b>PHONE:</b>	(210) 805-0802
				<b>FAX:</b>	(210) 805-0744
				<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	09/08/2018
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	104296	<b>Owner Information</b>	
R&K SPECIALIZED HOMES INC				R & K SPECIALIZED HOMES INC	
4703 SHADY BREEZE				1550 NE LOOP 410	
SAN ANTONIO				,STE 206	
		<b>TX</b>	78217		
<b>Phone</b>		(210) 805-0802	<b>Fax</b>	(210) 805-0744	
<b>TOTAL Lic Capacity:</b>		0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b> 6
<b>Cert Alzh Capacity:</b>		0	<b>TITLE19:</b>	0	
<b>PRIVATE Beds:</b>		0	<b>TITLE 18/19:</b>	0	
				<b>PHONE:</b>	(210) 805-0802
				<b>FAX:</b>	(210) 805-0744
				<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	07/14/2018
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	104154	<b>Owner Information</b>	
R&K SPECIALIZED HOMES INC				R & K SPECIALIZED HOMES INC	
10214 SQUANTO				1550 NE LOOP 410	
SAN ANTONIO				,STE 206	
		<b>TX</b>	78230		
<b>Phone</b>		(210) 805-0802	<b>Fax</b>	(210) 805-0744	
<b>TOTAL Lic Capacity:</b>		0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b> 6
<b>Cert Alzh Capacity:</b>		0	<b>TITLE19:</b>	0	
<b>PRIVATE Beds:</b>		0	<b>TITLE 18/19:</b>	0	
				<b>PHONE:</b>	(210) 805-0802
				<b>FAX:</b>	(210) 805-0744
				<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	05/19/2018
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	105215	<b>Owner Information</b>	
R&K SPECIALIZED HOMES, INC				R & K SPECIALIZED HOMES INC	
8711 OAK LEDGE DR.				1550 NE LOOP 410	
SAN ANTONIO				,STE 206	
		<b>TX</b>	78217		
<b>Phone</b>		(210) 805-0802	<b>Fax</b>		
<b>TOTAL Lic Capacity:</b>		0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b> 6
<b>Cert Alzh Capacity:</b>		0	<b>TITLE19:</b>	0	
<b>PRIVATE Beds:</b>		0	<b>TITLE 18/19:</b>	0	
				<b>PHONE:</b>	(210) 805-0802
				<b>FAX:</b>	(210) 805-0744
				<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	11/14/2018
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	007478	<b>Owner Information</b>	
REGENCY COMMUNITY SERVICES INC PINETREE				REGENCY COMMUNITY SERVICES INC	
2002 PINETREE LN				2391 NE LOOP 410	
SAN ANTONIO				,STE 403	
		<b>TX</b>	78232		
<b>Phone</b>		(210) 403-9372	<b>Fax</b>	(210) 495-1538	
<b>TOTAL Lic Capacity:</b>		0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b> 6
<b>Cert Alzh Capacity:</b>		0	<b>TITLE19:</b>	0	
<b>PRIVATE Beds:</b>		0	<b>TITLE 18/19:</b>	0	
				<b>PHONE:</b>	(210) 403-9372
				<b>FAX:</b>	(210) 495-1538
				<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	10/01/2017
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	104052	<b>Owner Information</b>	
ROLLING MEADOWS GROUP HOME				UCG CENTRAL TEXAS HOLDINGS LLC	
7419 OBBLIGATO				750 RUSK	
SAN ANTONIO				NEW BRAUNFELS	
		<b>TX</b>	78266		
<b>Phone</b>		(210) 651-1851	<b>Fax</b>	(214) 723-5331	
<b>TOTAL Lic Capacity:</b>		0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b> 6
<b>Cert Alzh Capacity:</b>		0	<b>TITLE19:</b>	0	
<b>PRIVATE Beds:</b>		0	<b>TITLE 18/19:</b>	0	
				<b>PHONE:</b>	(830) 372-2920
				<b>FAX:</b>	(214) 723-5331
				<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	09/01/2017

County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007362		<u>Owner Information</u>			
RUSTLING WAY					EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
6342 RUSTLING WAY					9901 LINN STATION RD			
SAN ANTONIO		TX	78249		LOUISVILLE	KY	40223	
Phone	(210) 697-9511		Fax		PHONE:	(502) 394-2100	FAX:	(502) 394-2285
TOTAL Lic Capacity:	0		TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID
Cert Alzh Capacity:	0		TITLE19:	0			SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0		TITLE 18/19:	0	License Exp Dt:	01/27/2018		
County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007287		<u>Owner Information</u>			
SAGE TRAIL					EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
14231 SAGE TRL					9901 LINN STATION RD			
SAN ANTONIO		TX	78231		LOUISVILLE	KY	40223	
Phone	(210) 493-8809		Fax		PHONE:	(502) 394-2100	FAX:	(502) 394-2285
TOTAL Lic Capacity:	0		TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID
Cert Alzh Capacity:	0		TITLE19:	0			SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0		TITLE 18/19:	0	License Exp Dt:	12/01/2016		
County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007114		<u>Owner Information</u>			
SAN ANTONIO STATE SUPPORTED LIVING CENTER					DADS			
6711 S NEW BRAUNFELS AVE					PO BOX 12668			
SAN ANTONIO		TX	78223		AUSTIN	TX	78711	
Phone	(210) 532-9610		Fax	(210) 531-5183	PHONE:	(512) 454-3761	FAX:	
TOTAL Lic Capacity:	0		TITLE 18:	0	ICF/IID:	339	PROGRAM TYPE:	ICF/IID
Cert Alzh Capacity:	0		TITLE19:	0			SERVICE TYPE	STATE SCHOOL/STATE CENTER
PRIVATE Beds:	0		TITLE 18/19:	0	License Exp Dt:			
County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007811		<u>Owner Information</u>			
SHADYWOOD					EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
215 SHADYWOOD					9901 LINN STATION RD			
SAN ANTONIO		TX	78216		LOUISVILLE	KY	40223	
Phone	(210) 829-0024		Fax		PHONE:	(502) 394-2100	FAX:	(502) 394-2285
TOTAL Lic Capacity:	0		TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID
Cert Alzh Capacity:	0		TITLE19:	0			SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0		TITLE 18/19:	0	License Exp Dt:	11/01/2017		
County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007603		<u>Owner Information</u>			
SILVER QUAIL					HOME AT SILVER QUAIL INC			
8706 SILVER QUAIL					8706 SILVER QUAIL			
SAN ANTONIO		TX	78250		SAN ANTONIO	TX	78250	
Phone	(210) 509-3548		Fax	(210) 509-0586	PHONE:	(210) 509-0114	FAX:	(210) 509-0586
TOTAL Lic Capacity:	0		TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID
Cert Alzh Capacity:	0		TITLE19:	0			SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0		TITLE 18/19:	0	License Exp Dt:	10/01/2017		
County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007481		<u>Owner Information</u>			
SPRING DOVE					SOUTH TEXAS COMMUNITY LIVING CORP			
5822 SPRING DOVE					18 AUGUSTA PINES DR			
SAN ANTONIO		TX	78247		SPRING	TX	77389	,STE 140 E
Phone	(210) 590-1346		Fax	(210) 494-7228	PHONE:	(281) 351-1758	FAX:	(210) 255-4500
TOTAL Lic Capacity:	0		TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID
Cert Alzh Capacity:	0		TITLE19:	0			SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0		TITLE 18/19:	0	License Exp Dt:	03/01/2018		

County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO		
Facility Information:		Facility ID:	003681		<u>Owner Information</u>				
SPRING HARVEST HOUSE					EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				
9714 SPRING HARVEST					9901 LINN STATION RD				
SAN ANTONIO		TX	78254-6105		LOUISVILLE		KY	40223	
Phone	(210) 681-8776		Fax		PHONE:	(502) 394-2100	FAX:	(502) 394-2285	
TOTAL Lic Capacity:	0		TITLE 18:	0	ICF/IID:	6			
Cert Alzh Capacity:	0		TITLE19:	0					
PRIVATE Beds:	0		TITLE 18/19:	0					
						PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
						License Exp Dt:	06/20/2018		

County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO		
Facility Information:		Facility ID:	101810		<u>Owner Information</u>				
STORMY SUNSET					EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				
5223 STORMY SUNSET					9901 LINN STATION RD				
SAN ANTONIO		TX	78247		LOUISVILLE		KY	40223	
Phone	(210) 590-6745		Fax		PHONE:	(502) 394-2100	FAX:	(502) 394-2285	
TOTAL Lic Capacity:	0		TITLE 18:	0	ICF/IID:	6			
Cert Alzh Capacity:	0		TITLE19:	0					
PRIVATE Beds:	0		TITLE 18/19:	0					
						PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
						License Exp Dt:	11/01/2017		

County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO		
Facility Information:		Facility ID:	003633		<u>Owner Information</u>				
SUNNY GROVE					REACHING MAXIMUM INDEPENDENCE INC				
4706 SUNNY GROVE					6336 MONTGOMERY DR				
SAN ANTONIO		TX	78217		SAN ANTONIO		TX	78239	
Phone	(210) 655-9353		Fax	(210) 656-0199	PHONE:	(210) 656-6674	FAX:	(210) 656-0199	
TOTAL Lic Capacity:	0		TITLE 18:	0	ICF/IID:	6			
Cert Alzh Capacity:	0		TITLE19:	0					
PRIVATE Beds:	0		TITLE 18/19:	0					
						PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
						License Exp Dt:	12/18/2017		

County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO		
Facility Information:		Facility ID:	007520		<u>Owner Information</u>				
SWANDALE					DREAMS COME TRUE INC				
3242 SWANDALE					3242 SWANDALE ST				
SAN ANTONIO		TX	78230		SAN ANTONIO		TX	78230	
Phone	(210) 979-6420		Fax	(210) 308-7411	PHONE:	(210) 979-6420	FAX:	(210) 308-7411	
TOTAL Lic Capacity:	0		TITLE 18:	0	ICF/IID:	6			
Cert Alzh Capacity:	0		TITLE19:	0					
PRIVATE Beds:	0		TITLE 18/19:	0					
						PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
						License Exp Dt:	03/25/2018		

County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO		
Facility Information:		Facility ID:	007639		<u>Owner Information</u>				
THATCH					EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				
8820 THATCH					9901 LINN STATION RD				
SAN ANTONIO		TX	78240		LOUISVILLE		KY	40223	
Phone	(210) 509-8189		Fax		PHONE:	(502) 394-2100	FAX:	(502) 394-2285	
TOTAL Lic Capacity:	0		TITLE 18:	0	ICF/IID:	6			
Cert Alzh Capacity:	0		TITLE19:	0					
PRIVATE Beds:	0		TITLE 18/19:	0					
						PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
						License Exp Dt:	12/01/2018		

County	BEXAR		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO		
Facility Information:		Facility ID:	003696		<u>Owner Information</u>				
TIMBER MEADOW					EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				
5401 TIMBER MEADOW					9901 LINN STATION RD				
SAN ANTONIO		TX	78250		LOUISVILLE		KY	40223	
Phone	(210) 680-1818		Fax		PHONE:	(502) 394-2100	FAX:	(502) 394-2285	
TOTAL Lic Capacity:	0		TITLE 18:	0	ICF/IID:	6			
Cert Alzh Capacity:	0		TITLE19:	0					
PRIVATE Beds:	0		TITLE 18/19:	0					
						PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
						License Exp Dt:	08/29/2018		

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>	<b>Facility ID:</b> 101823	<b>Owner Information</b>			
VISTA BRIAR		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
17002 VISTA BRIAR DR		9901 LINN STATION RD			
SAN ANTONIO	TX 78247	LOUISVILLE KY 40223			
<b>Phone</b> (210) 599-4030	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 11/01/2017			
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>	<b>Facility ID:</b> 007488	<b>Owner Information</b>			
VISTA CREEK COMMUNITY HOME		SOUTH TEXAS COMMUNITY LIVING CORP			
5403 VISTA CREEK		18 AUGUSTA PINES DR ,STE 140 E			
SAN ANTONIO	TX 78247	SPRING TX 77389			
<b>Phone</b> (210) 599-3624	<b>Fax</b> (210) 494-7228	<b>PHONE:</b> (281) 351-1758 <b>FAX:</b> (210) 255-4500			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 03/01/2018			
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>	<b>Facility ID:</b> 102604	<b>Owner Information</b>			
VISTA RUN		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
5303 VISTA RUN		9901 LINN STATION RD			
SAN ANTONIO	TX 78247	LOUISVILLE KY 40223			
<b>Phone</b> (210) 653-8261	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 11/01/2017			
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>	<b>Facility ID:</b> 007291	<b>Owner Information</b>			
WELLES HARBOR		REACHING MAXIMUM INDEPENDENCE INC			
8730 WELLES HARBOR		6336 MONTGOMERY DR			
SAN ANTONIO	TX 78240	SAN ANTONIO TX 78239			
<b>Phone</b> (210) 558-6998	<b>Fax</b> (210) 656-0199	<b>PHONE:</b> (210) 656-6674 <b>FAX:</b> (210) 656-0199			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 07/09/2018			
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>	<b>Facility ID:</b> 007550	<b>Owner Information</b>			
WESTERN PINE WOODS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
4507 WESTERN PINE WOODS		9901 LINN STATION RD			
SAN ANTONIO	TX 78249	LOUISVILLE KY 40223			
<b>Phone</b> (210) 493-8995	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 11/01/2017			
County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>	<b>Facility ID:</b> 007420	<b>Owner Information</b>			
WHISPER VALLEY		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
10934 WHISPER VALLEY		9901 LINN STATION RD			
SAN ANTONIO	TX 78230	LOUISVILLE KY 40223			
<b>Phone</b> (210) 492-3727	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 11/01/2017			

County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007319		<u>Owner Information</u>				
WOODLAND HILLS				R & K SPECIALIZED HOMES INC					
9418 WOODLAND HILLS				1550 NE LOOP 410					
SAN ANTONIO		TX	78250			,STE 206			
Phone	(210) 680-3632	Fax			SAN ANTONIO		TX	78209	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID: 6		PHONE:	(210) 805-0802
Cert Alzh Capacity:		0	TITLE19:		0			FAX:	(210) 805-0744
PRIVATE Beds:		0	TITLE 18/19:		0			PROGRAM TYPE:	ICF/IID
								SERVICE TYPE	PRIVATELY OWNED
						License Exp Dt:		09/27/2017	
County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007250		<u>Owner Information</u>				
COUNCIL OAKS AT PHOENIX				COUNCIL OAKS COMMUNITY OPTIONS LTD					
8418 PHOENIX				11901 TOEPPERWEIN					
SELMA		TX	78154			,STE 1001			
Phone	(210) 945-8038	Fax			SAN ANTONIO		TX	78233	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID: 6		PHONE:	(210) 646-0717
Cert Alzh Capacity:		0	TITLE19:		0			FAX:	(210) 599-9789
PRIVATE Beds:		0	TITLE 18/19:		0			PROGRAM TYPE:	ICF/IID
								SERVICE TYPE	PRIVATELY OWNED
						License Exp Dt:		11/01/2017	
County	BEXAR			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	003948		<u>Owner Information</u>				
GUILFORD FORGE COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP					
250 GUILFORD FORGE				9901 LINN STATION ROAD					
UNIVERSAL CITY		TX	78148-3615			LOUISVILLE			
Phone	(210) 658-0412	Fax			KY		40223-3808		
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID: 6		PHONE:	(502) 394-2100
Cert Alzh Capacity:		0	TITLE19:		0			FAX:	(502) 394-2285
PRIVATE Beds:		0	TITLE 18/19:		0			PROGRAM TYPE:	ICF/IID
								SERVICE TYPE	PRIVATELY OWNED
						License Exp Dt:		01/01/2017	
County	BOWIE			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER	
Facility Information:		Facility ID:	003645		<u>Owner Information</u>				
EVERGREEN NORTHWOOD COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC					
113 NORTHWOOD				10810 SANDEN DR					
NASH		TX	75569			DALLAS			
Phone	(903) 831-4239	Fax	(903) 792-1861		TX		75238		
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID: 6		PHONE:	(972) 386-4834
Cert Alzh Capacity:		0	TITLE19:		0			FAX:	
PRIVATE Beds:		0	TITLE 18/19:		0			PROGRAM TYPE:	ICF/IID
								SERVICE TYPE	PRIVATELY OWNED
						License Exp Dt:		02/23/2018	
County	BOWIE			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER	
Facility Information:		Facility ID:	003628		<u>Owner Information</u>				
EVERGREEN COOPER LANE COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC					
3312 COOPER LN				10810 SANDEN DR					
TEXARKANA		TX	75503			DALLAS			
Phone	(903) 831-4632	Fax	(903) 792-1861		TX		75238		
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID: 6		PHONE:	(972) 386-4834
Cert Alzh Capacity:		0	TITLE19:		0			FAX:	
PRIVATE Beds:		0	TITLE 18/19:		0			PROGRAM TYPE:	ICF/IID
								SERVICE TYPE	PRIVATELY OWNED
						License Exp Dt:		11/21/2017	
County	BOWIE			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER	
Facility Information:		Facility ID:	007248		<u>Owner Information</u>				
EVERGREEN FORTUNE COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC					
3002 FORTUNE AVE				10810 SANDEN DR					
TEXARKANA		TX	75503			DALLAS			
Phone	(903) 838-5625	Fax	(903) 792-1861		TX		75238		
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID: 6		PHONE:	(972) 386-4834
Cert Alzh Capacity:		0	TITLE19:		0			FAX:	
PRIVATE Beds:		0	TITLE 18/19:		0			PROGRAM TYPE:	ICF/IID
								SERVICE TYPE	PRIVATELY OWNED
						License Exp Dt:		03/20/2018	

County	BOWIE	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
<b>Facility Information:</b>		<b>Facility ID:</b>	003637	<b>Owner Information</b>	
EVERGREEN MARYLAND COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
106 MARYLAND				10810 SANDEN DR	
TEXARKANA		<b>TX</b>	75501	DALLAS TX 75238	
<b>Phone</b>	(903) 831-4967	<b>Fax</b>	(903) 792-1861	<b>PHONE:</b>	(972) 386-4834
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/31/2018
County	BOWIE	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
<b>Facility Information:</b>		<b>Facility ID:</b>	003638	<b>Owner Information</b>	
EVERGREEN MEADOW LANE COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
#20 MEADOW LN				10810 SANDEN DR	
TEXARKANA		<b>TX</b>	75503	DALLAS TX 75238	
<b>Phone</b>	(903) 792-2529	<b>Fax</b>	(903) 792-1861	<b>PHONE:</b>	(972) 386-4834
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	12/22/2016
County	BOWIE	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
<b>Facility Information:</b>		<b>Facility ID:</b>	007203	<b>Owner Information</b>	
EVERGREEN MOORES LANE COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
3611 MOORES LN				10810 SANDEN DR	
TEXARKANA		<b>TX</b>	75503	DALLAS TX 75238	
<b>Phone</b>	(903) 832-2682	<b>Fax</b>	(903) 792-1861	<b>PHONE:</b>	(972) 386-4834
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	10/10/2017
County	BOWIE	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
<b>Facility Information:</b>		<b>Facility ID:</b>	007403	<b>Owner Information</b>	
EVERGREEN PINE KNOLL COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
3603 PINE KNOLL				10810 SANDEN DR	
TEXARKANA		<b>TX</b>	75503	DALLAS TX 75238	
<b>Phone</b>	(903) 793-0193	<b>Fax</b>	(903) 793-3129	<b>PHONE:</b>	(972) 386-4834
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	03/05/2018
County	BOWIE	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
<b>Facility Information:</b>		<b>Facility ID:</b>	007617	<b>Owner Information</b>	
NEW HORIZONS ELIZABETH				HORIZONS GENERAL PARTNERSHIP	
4820 ELIZABETH ST				4904 ELIZABETH ST	
TEXARKANA		<b>TX</b>	75503	TEXARKANA TX 75503	
<b>Phone</b>	(903) 794-0509	<b>Fax</b>	(903) 793-6460	<b>PHONE:</b>	(903) 794-0509
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	07/22/2018
County	BOWIE	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
<b>Facility Information:</b>		<b>Facility ID:</b>	007408	<b>Owner Information</b>	
NEW HORIZONS MAGNOLIA				HORIZONS GENERAL PARTNERSHIP	
4125 MAGNOLIA ST				4904 ELIZABETH ST	
TEXARKANA		<b>TX</b>	75503	TEXARKANA TX 75503	
<b>Phone</b>	(903) 794-0509	<b>Fax</b>	(903) 793-6460	<b>PHONE:</b>	(903) 794-0509
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	05/15/2018

County	BOWIE			Reg Svcs:	ICF/IID TEAM			Region	04 - TYLER				
Facility Information:		Facility ID:	007569		<u>Owner Information</u>								
NEW HORIZONS STILLWELL				HORIZONS GENERAL PARTNERSHIP									
2611 STILLWELL DR				4904 ELIZABETH ST									
TEXARKANA		TX	75503			TEXARKANA		TX	75503				
Phone	(903) 794-0509		Fax	(903) 793-6460				PHONE:	(903) 794-0509		FAX:	(903) 793-6460	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:		0	TITLE19:		0								
PRIVATE Beds:		0	TITLE 18/19:		0				License Exp Dt:	11/23/2017			
County	BOWIE			Reg Svcs:	ICF/IID TEAM			Region	04 - TYLER				
Facility Information:		Facility ID:	007407		<u>Owner Information</u>								
NEW HORIZONS WEST 27TH ST				HORIZONS GENERAL PARTNERSHIP									
404 W 27TH ST				4904 ELIZABETH ST									
TEXARKANA		TX	75503			TEXARKANA		TX	75503				
Phone	(903) 794-0509		Fax	(903) 793-6460				PHONE:	(903) 794-0509		FAX:	(903) 793-6460	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:		0	TITLE19:		0								
PRIVATE Beds:		0	TITLE 18/19:		0				License Exp Dt:	05/13/2018			
County	BRAZORIA			Reg Svcs:	UNIT 21 (ICF/MR)			Region	06 - HOUSTON				
Facility Information:		Facility ID:	003925		<u>Owner Information</u>								
HIGHLAND GROUP HOME				EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST									
1304 HIGHLAND				9901 LINN STATION ROAD									
ALVIN		TX	77512			LOUISVILLE		KY	40223-3808				
Phone	(281) 388-2726		Fax					PHONE:	(512) 498-2700		FAX:	(512) 498-2777	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:		0	TITLE19:		0								
PRIVATE Beds:		0	TITLE 18/19:		0				License Exp Dt:	03/01/2018			
County	BRAZORIA			Reg Svcs:	UNIT 21 (ICF/MR)			Region	06 - HOUSTON				
Facility Information:		Facility ID:	003618		<u>Owner Information</u>								
TOVREA				EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST									
802 TOVREA				9901 LINN STATION ROAD									
ALVIN		TX	77512			LOUISVILLE		KY	40223-3808				
Phone	(281) 331-7413		Fax					PHONE:	(512) 498-2700		FAX:	(512) 498-2777	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:		0	TITLE19:		0								
PRIVATE Beds:		0	TITLE 18/19:		0				License Exp Dt:	07/20/2018			
County	BRAZORIA			Reg Svcs:	UNIT 21 (ICF/MR)			Region	06 - HOUSTON				
Facility Information:		Facility ID:	105082		<u>Owner Information</u>								
ARCOLA				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS									
800 N ARCOLA				9901 LINN STATION RD									
ANGLETON		TX	77515			LOUISVILLE		KY	40223				
Phone	(979) 848-8600		Fax	(979) 345-4969				PHONE:	(502) 394-2100		FAX:	(502) 394-2285	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:		0	TITLE19:		0								
PRIVATE Beds:		0	TITLE 18/19:		0				License Exp Dt:	08/01/2017			
County	BRAZORIA			Reg Svcs:	UNIT 21 (ICF/MR)			Region	06 - HOUSTON				
Facility Information:		Facility ID:	007626		<u>Owner Information</u>								
OAK TREE				EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST									
1811 OAKTREE CIR				9901 LINN STATION ROAD									
PEARLAND		TX	77581			LOUISVILLE		KY	40223-3808				
Phone	(281) 992-8176		Fax					PHONE:	(512) 498-2700		FAX:	(512) 498-2777	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:		0	TITLE19:		0								
PRIVATE Beds:		0	TITLE 18/19:		0				License Exp Dt:	09/07/2018			

County	BRAZORIA			Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
Facility Information:		Facility ID:	003963		<u>Owner Information</u>				
SOMERSET GROUP HOME					EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST				
1117 CHESTERWOOD					9901 LINN STATION ROAD				
PEARLAND		TX	77581		LOUISVILLE		KY	40223-3808	
Phone	(281) 992-8510		Fax			PHONE:		(512) 498-2700	FAX: (512) 498-2777
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:		02/28/2018	
PRIVATE Beds:	0	TITLE 18/19:	0						
County	BRAZOS			Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007662		<u>Owner Information</u>				
FAMILY TREE					THE MHMR AUTHORITY OF BRAZOS VALLEY				
408 N WASHINGTON AVE					P.O. BOX 4588				
BRYAN		TX	77803		BRYAN		TX	77805	
Phone	(979) 361-9875		Fax			PHONE:		(979) 361-9800	FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 8		PROGRAM TYPE:		ICF/IID	SERVICE TYPE GOVERNMENT BASED
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:			
PRIVATE Beds:	0	TITLE 18/19:	0						
County	BRAZOS			Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007561		<u>Owner Information</u>				
MOSAIC					MOSAIC				
3706 CARTER CREEK PKWY					428 ST ANDREWS DR				
BRYAN		TX	77801		ALLEN		TX	75002	
Phone	(979) 823-7622		Fax	(979) 775-5733		PHONE:		(469) 675-1561	FAX: (469) 675-1562
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:		01/01/2017	
PRIVATE Beds:	0	TITLE 18/19:	0						
County	BROWN			Reg Svcs:	ICF/IID		Region	02 - ABILENE	
Facility Information:		Facility ID:	007325		<u>Owner Information</u>				
CENTRAL TEXAS MHMR CENTER					CENTRAL TEXAS MHMR CENTER				
2209 ELEVENTH ST					408 MULBERRY DR				
BROWNWOOD		TX	76801						
Phone	(325) 646-6952		Fax			PHONE:		(325) 646-9574	FAX: (325) 646-7911
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PROGRAM TYPE:		ICF/IID	SERVICE TYPE GOVERNMENT BASED
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:			
PRIVATE Beds:	0	TITLE 18/19:	0						
County	BROWN			Reg Svcs:	ICF/IID		Region	02 - ABILENE	
Facility Information:		Facility ID:	003734		<u>Owner Information</u>				
OPPORTUNITY DEVELOPMENT CENTER 1					CENTRAL TEXAS MHMR CENTER				
1600 STEWART ST					408 MULBERRY DR				
BROWNWOOD		TX	76801						
Phone	(325) 643-5565		Fax	(325) 643-3966		PHONE:		(325) 646-9574	FAX: (325) 646-7911
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 13		PROGRAM TYPE:		ICF/IID	SERVICE TYPE GOVERNMENT BASED
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:			
PRIVATE Beds:	0	TITLE 18/19:	0						
County	BROWN			Reg Svcs:	ICF/IID		Region	02 - ABILENE	
Facility Information:		Facility ID:	003840		<u>Owner Information</u>				
OPPORTUNITY DEVELOPMENT CENTER 2					CENTRAL TEXAS MHMR CENTER				
403 MULBERRY DR					408 MULBERRY DR				
BROWNWOOD		TX	76801						
Phone	(325) 643-1336		Fax	(325) 643-3966		PHONE:		(325) 646-9574	FAX: (325) 646-7911
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 13		PROGRAM TYPE:		ICF/IID	SERVICE TYPE GOVERNMENT BASED
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:			
PRIVATE Beds:	0	TITLE 18/19:	0						



County	BURNET			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:		Facility ID:		003675		Owner Information					
BERTRAM COMMUNITY RESIDENCE						D & S RESIDENTIAL SERVICES LP					
648 W CEDAR ST						8911 N CAPITAL OF TX HWY		,BLDG 1		STE 1300	
BERTRAM		TX	78605			AUSTIN TX		78759			
Phone	(512) 355-3005		Fax	(512) 327-5355		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		12/01/2017			

County	BURNET			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:		Facility ID:		007505		Owner Information					
BLUEBONNET COMMUNITY RESIDENCE						D & S RESIDENTIAL SERVICES LP					
1260 HWY 29 W						8911 N CAPITAL OF TX HWY		,BLDG 1		STE 1300	
BERTRAM		TX	78605			AUSTIN TX		78759			
Phone	(512) 355-3012		Fax	(512) 327-5355		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		12/01/2017			

County	BURNET			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:		Facility ID:		007450		Owner Information					
WOODVIEW COMMUNITY RESIDENCE						D & S RESIDENTIAL SERVICES LP					
407 CR 320						8911 N CAPITAL OF TX HWY		,BLDG 1		STE 1300	
BERTRAM		TX	78605			AUSTIN TX		78759			
Phone	(512) 355-3213		Fax	(512) 327-5355		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		12/01/2017			

County	BURNET			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:		Facility ID:		003879		Owner Information					
HIGHLAND LAKES COMMUNITY RESIDENCE						D & S RESIDENTIAL SERVICES LP					
705 KINCHELOE						8911 N CAPITAL OF TX HWY		,BLDG 1		STE 1300	
BURNET		TX	78611			AUSTIN TX		78759			
Phone	(512) 756-4404		Fax	(512) 327-5355		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		12/01/2017			

County	BURNET			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:		Facility ID:		007221		Owner Information					
SUNSET COMMUNITY RESIDENCE						D & S RESIDENTIAL SERVICES LP					
313 SUNSET DR						8911 N CAPITAL OF TX HWY		,BLDG 1		STE 1300	
BURNET		TX	78611			AUSTIN TX		78759			
Phone	(512) 756-6782		Fax	(512) 327-5355		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		12/01/2017			

County	BURNET			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:		Facility ID:		003763		Owner Information					
BURNET COUNTY COMMUNITY RESIDENCE						D & S RESIDENTIAL SERVICES LP					
1513 BLUEBONNET DR						8911 N CAPITAL OF TX HWY		,BLDG 1		STE 1300	
MARBLE FALLS		TX	78654			AUSTIN TX		78759			
Phone	(830) 693-3449		Fax	(512) 327-5355		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		8			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		12/01/2017			

County	CALDWELL		Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007624		<u>Owner Information</u>			
CENTURY HOUSE					UCG CENTRAL TEXAS HOLDINGS LLC			
1604 CENTURY OAKS					750 RUSK			
LOCKHART		TX	78644		NEW BRAUNFELS TX		78130	
Phone	(512) 398-6721	Fax	(214) 723-5331		PHONE:	(830) 372-2920	FAX:	(214) 723-5331
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		09/01/2017
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED		
County	CALDWELL		Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	003949		<u>Owner Information</u>			
LOCKHART COMMUNITY HOME					EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
1501 SUNRISE TER DR					9901 LINN STATION ROAD			
LOCKHART		TX	78644		LOUISVILLE KY		40223-3808	
Phone	(512) 376-6550	Fax	(512) 302-3978		PHONE:	(502) 394-2100	FAX:	(502) 394-2285
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/01/2019
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED		
County	CALHOUN		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	003955		<u>Owner Information</u>			
CALHOUN HOME					UCG CENTRAL TEXAS HOLDINGS LLC			
102 BURNET RD					750 RUSK			
PORT LAVACA		TX	77979		NEW BRAUNFELS TX		78130	
Phone	(512) 552-4316	Fax			PHONE:	(830) 372-2920	FAX:	(214) 723-5331
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		03/01/2018
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		GOVERNMENT BASED		
County	CAMERON		Reg Svcs:	CORPUS CHRISTI 61		Region	11 - CORPUS CHRISTI	
Facility Information:		Facility ID:	003744		<u>Owner Information</u>			
CARING PALMS HEALTH CARE CENTER					CARING PALMS HEALTH CARE CENTER INC			
1415 W WASHINGTON ST					8000 CALMONT ,APT 249			
BROWNSVILLE		TX	78520		FORT WORTH TX		76116	
Phone	(956) 546-3714	Fax			PHONE:	(817) 992-2028	FAX:	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		72
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		04/01/2018
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED		
County	CAMERON		Reg Svcs:	CORPUS CHRISTI 61		Region	11 - CORPUS CHRISTI	
Facility Information:		Facility ID:	007559		<u>Owner Information</u>			
CASA LINDA GROUP HOME					VALLEY RESIDENTIAL CORPORATION			
8 CASA LINDA					8 CASA LINDA			
BROWNSVILLE		TX	78521		BROWNSVILLE TX		78521	
Phone	(956) 546-4668	Fax	(956) 546-1636		PHONE:	(956) 546-4668	FAX:	(956) 546-1636
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		09/22/2017
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED		
County	CAMERON		Reg Svcs:	CORPUS CHRISTI 61		Region	11 - CORPUS CHRISTI	
Facility Information:		Facility ID:	007244		<u>Owner Information</u>			
ADRIAN COMMUNITY HOME					EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
2214 ADRIAN ST					9901 LINN STATION ROAD			
HARLINGEN		TX	78550-7411		LOUISVILLE KY		40223-3808	
Phone	(956) 428-3874	Fax			PHONE:	(502) 394-2100	FAX:	(502) 394-2285
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/01/2017
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED		

County	CAMERON			Reg Svcs:	CORPUS CHRISTI 61			Region	11 - CORPUS CHRISTI					
Facility Information:			Facility ID:	003954		<u>Owner Information</u>								
DOMINION COMMUNITY HOME					EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP									
133 W DOMINION					9901 LINN STATION ROAD									
HARLINGEN			TX	78550-3825		LOUISVILLE			KY	40223-3808				
Phone	(956) 421-4035		Fax			PHONE:			(502) 394-2100		FAX:	(502) 394-2285		
TOTAL Lic Capacity:			0	TITLE 18:		0	ICF/IID:			6				
Cert Alzh Capacity:			0	TITLE19:		0	PROGRAM TYPE:			ICF/IID		SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:			0	TITLE 18/19:		0	License Exp Dt:			01/01/2019				
County	CAMERON			Reg Svcs:	CORPUS CHRISTI 61			Region	11 - CORPUS CHRISTI					
Facility Information:			Facility ID:	003983		<u>Owner Information</u>								
EAST WASHINGTON COMMUNITY HOME					EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP									
1907 E WASHINGTON AVE					9901 LINN STATION ROAD									
HARLINGEN			TX	78550-5744		LOUISVILLE			KY	40223-3808				
Phone	(956) 423-1942		Fax			PHONE:			(502) 394-2100		FAX:	(502) 394-2285		
TOTAL Lic Capacity:			0	TITLE 18:		0	ICF/IID:			6				
Cert Alzh Capacity:			0	TITLE19:		0	PROGRAM TYPE:			ICF/IID		SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:			0	TITLE 18/19:		0	License Exp Dt:			01/01/2017				
County	CAMERON			Reg Svcs:	CORPUS CHRISTI 61			Region	11 - CORPUS CHRISTI					
Facility Information:			Facility ID:	007236		<u>Owner Information</u>								
MARIPOSA COMMUNITY HOME					EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP									
2505 MARIPOSA					9901 LINN STATION ROAD									
HARLINGEN			TX	78550-7853		LOUISVILLE			KY	40223-3808				
Phone	(956) 428-1666		Fax			PHONE:			(502) 394-2100		FAX:	(502) 394-2285		
TOTAL Lic Capacity:			0	TITLE 18:		0	ICF/IID:			6				
Cert Alzh Capacity:			0	TITLE19:		0	PROGRAM TYPE:			ICF/IID		SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:			0	TITLE 18/19:		0	License Exp Dt:			01/01/2017				
County	CAMERON			Reg Svcs:	CORPUS CHRISTI 61			Region	11 - CORPUS CHRISTI					
Facility Information:			Facility ID:	007112		<u>Owner Information</u>								
RIO GRANDE STATE CENTER					DADS									
1401 S RANGERVILLE RD					PO BOX 12668									
HARLINGEN			TX	78550		AUSTIN			TX	78711				
Phone	(956) 364-8000		Fax	(956) 364-8487		PHONE:			(512) 454-3761		FAX:			
TOTAL Lic Capacity:			0	TITLE 18:		0	ICF/IID:			110				
Cert Alzh Capacity:			0	TITLE19:		0	PROGRAM TYPE:			ICF/IID		SERVICE TYPE	STATE SCHOOL/STATE CENTER	
PRIVATE Beds:			0	TITLE 18/19:		0	License Exp Dt:							
County	CAMERON			Reg Svcs:	CORPUS CHRISTI 61			Region	11 - CORPUS CHRISTI					
Facility Information:			Facility ID:	003979		<u>Owner Information</u>								
SAM HOUSTON COMMUNITY HOME					EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP									
580 N SAM HOUSTON BLVD					9901 LINN STATION ROAD									
SAN BENITO			TX	78586-4669		LOUISVILLE			KY	40223-3808				
Phone	(956) 399-1020		Fax	(512) 328-8211		PHONE:			(502) 394-2100		FAX:	(502) 394-2285		
TOTAL Lic Capacity:			0	TITLE 18:		0	ICF/IID:			6				
Cert Alzh Capacity:			0	TITLE19:		0	PROGRAM TYPE:			ICF/IID		SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:			0	TITLE 18/19:		0	License Exp Dt:			01/01/2017				
County	CASS			Reg Svcs:	ICF/IID TEAM			Region	04 - TYLER					
Facility Information:			Facility ID:	003699		<u>Owner Information</u>								
EVERGREEN CHOCTAW COMMUNITY HOME					EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC									
1313 CHOCTAW					10810 SANDEN DR									
ATLANTA			TX	75551		DALLAS			TX	75238				
Phone	(903) 796-9619		Fax	(903) 792-1861		PHONE:			(972) 386-4834		FAX:			
TOTAL Lic Capacity:			0	TITLE 18:		0	ICF/IID:			6				
Cert Alzh Capacity:			0	TITLE19:		0	PROGRAM TYPE:			ICF/IID		SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:			0	TITLE 18/19:		0	License Exp Dt:			09/18/2017				

County	CASS	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
<b>Facility Information:</b>		<b>Facility ID:</b>	007432	<b>Owner Information</b>	
EVERGREEN CLEARVIEW COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
101 CLEARVIEW				10810 SANDEN DR	
ATLANTA		<b>TX</b>	75551		
<b>Phone</b>	(903) 796-5552	<b>Fax</b>	(903) 792-1861	DALLAS	TX 75238
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PHONE:</b>	(972) 386-4834
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	07/09/2018
County	CHEROKEE	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
<b>Facility Information:</b>		<b>Facility ID:</b>	010279	<b>Owner Information</b>	
ATCHISON GROUP HOME				BLUEBONNET HOMES INC	
RR 2 BOX 796 514 CR 4204				128 S MAGDALEN	
JACKSONVILLE		<b>TX</b>	75766		
<b>Phone</b>	(903) 586-3419	<b>Fax</b>		SAN ANGELO	TX 76903
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>PHONE:</b>	(325) 658-6664
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>FAX:</b>	(325) 659-3769
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	11/01/2018
County	CHEROKEE	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
<b>Facility Information:</b>		<b>Facility ID:</b>	010278	<b>Owner Information</b>	
DOGWOOD GROUP HOME				BLUEBONNET HOMES INC	
432 DOGWOOD ST				128 S MAGDALEN	
JACKSONVILLE		<b>TX</b>	75766		
<b>Phone</b>	(903) 586-8556	<b>Fax</b>		SAN ANGELO	TX 76903
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>PHONE:</b>	(325) 658-6664
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>FAX:</b>	(325) 659-3769
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	11/01/2018
County	CHEROKEE	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
<b>Facility Information:</b>		<b>Facility ID:</b>	010355	<b>Owner Information</b>	
SAN ANTONIO GROUP HOME				BLUEBONNET HOMES INC	
602 DALLAS STREET				128 S MAGDALEN	
JACKSONVILLE		<b>TX</b>	75766		
<b>Phone</b>	(903) 541-4919	<b>Fax</b>	(903) 586-9120	SAN ANGELO	TX 76903
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>PHONE:</b>	(325) 658-6664
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>FAX:</b>	(325) 659-3769
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	11/01/2018
County	CHEROKEE	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
<b>Facility Information:</b>		<b>Facility ID:</b>	007648	<b>Owner Information</b>	
FOREST HILLS GROUP HOME				ANDERSON CHEROKEE COMMUNITY ENRICHMENT SERVICES	
803 SHARON ST				913 N JACKSON	
RUSK		<b>TX</b>	75785		
<b>Phone</b>	(903) 683-6151	<b>Fax</b>		JACKSONVILLE	TX 75766
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>PHONE:</b>	(903) 586-5507
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>FAX:</b>	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	GOVERNMENT BASED
				<b>License Exp Dt:</b>	
County	CHEROKEE	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
<b>Facility Information:</b>		<b>Facility ID:</b>	007649	<b>Owner Information</b>	
PECAN GROVE HOME				ANDERSON CHEROKEE COMMUNITY ENRICHMENT SERVICES	
619 E FOURTH ST				913 N JACKSON	
RUSK		<b>TX</b>	75785		
<b>Phone</b>	(903) 683-6547	<b>Fax</b>		JACKSONVILLE	TX 75766
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>PHONE:</b>	(903) 586-5507
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>FAX:</b>	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	GOVERNMENT BASED
				<b>License Exp Dt:</b>	

County	COLLIN			Reg Svcs:	IID TEAM			Region	03 - ARLINGTON				
Facility Information:		Facility ID:		007421		<u>Owner Information</u>							
CHERRYWOOD COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP									
2900 PORT O CALL				9901 LINN STATION ROAD									
PLANO		TX	75075		LOUISVILLE		KY	40223-3808					
Phone	(972) 867-4159		Fax										
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PHONE:		(502) 394-2100	FAX:	(502) 394-2285
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED			
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		12/05/2017					
County	COLLIN			Reg Svcs:	IID TEAM			Region	03 - ARLINGTON				
Facility Information:		Facility ID:		007306		<u>Owner Information</u>							
COLLIN COUNTY MHMR AT MULLINS				LIFEPATH SYSTEMS									
1313 MULLINS				1111									
PLANO		TX	75025				TX						
Phone	(214) 424-4814		Fax										
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PHONE:		FAX:		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	GOVERNMENT BASED			
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:							
County	COLLIN			Reg Svcs:	IID TEAM			Region	03 - ARLINGTON				
Facility Information:		Facility ID:		007269		<u>Owner Information</u>							
CROSS BEND HOUSE				LIFEPATH SYSTEMS									
3019 CROSS BEND				1111									
PLANO		TX	75023				TX						
Phone	(214) 596-8916		Fax										
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PHONE:		FAX:		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	GOVERNMENT BASED			
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:							
County	COLLIN			Reg Svcs:	IID TEAM			Region	03 - ARLINGTON				
Facility Information:		Facility ID:		007493		<u>Owner Information</u>							
LONGHORN COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP									
957 LONGHORN DR				9901 LINN STATION ROAD									
PLANO		TX	75023		LOUISVILLE		KY	40223-3808					
Phone	(972) 517-3762		Fax										
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PHONE:		(502) 394-2100	FAX:	(502) 394-2285
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED			
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/01/2017					
County	COLLIN			Reg Svcs:	IID TEAM			Region	03 - ARLINGTON				
Facility Information:		Facility ID:		007402		<u>Owner Information</u>							
RIVERBEND COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP									
3700 GRIFBRICK				9901 LINN STATION ROAD									
PLANO		TX	75075-1514		LOUISVILLE		KY	40223-3808					
Phone	(972) 612-0394		Fax										
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PHONE:		(502) 394-2100	FAX:	(502) 394-2285
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED			
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/01/2019					
County	COLORADO			Reg Svcs:	UNIT 21 (ICF/MR)			Region	06 - HOUSTON				
Facility Information:		Facility ID:		003993		<u>Owner Information</u>							
WEIMAR COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED									
104 WEST SAINT CHARLES				33 CYPRESS BLVD									
WEIMAR		TX	78962		ROUND ROCK		TX	,SUITE 100					
Phone	(979) 725-8826		Fax	78665									
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PHONE:		(512) 336-0800	FAX:	(512) 336-0812
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED			
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		03/15/2018					

County	COMAL	Reg Svcs:		TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:		Facility ID:	003611	<u>Owner Information</u>		
BESS HOUSE				ANIOL III LLC		
157 BESS				750 RUSK AVE		
NEW BRAUNFELS		TX	78130	NEW BRAUNFELS TX		78130
Phone	(830) 620-6174	Fax	(830) 629-2373	PHONE: (713) 271-7777		FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE: ICF/IID
Cert Alzh Capacity:	0	TITLE19:	0	SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/01/2017	
County	COMAL	Reg Svcs:		TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:		Facility ID:	003997	<u>Owner Information</u>		
EARL HOUSE				ANIOL III LLC		
926 EARL DR				750 RUSK AVE		
NEW BRAUNFELS		TX	78130	NEW BRAUNFELS TX		78130
Phone	(830) 620-0141	Fax	(830) 629-2373	PHONE: (713) 271-7777		FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE: ICF/IID
Cert Alzh Capacity:	0	TITLE19:	0	SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/01/2017	
County	COMAL	Reg Svcs:		TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:		Facility ID:	007260	<u>Owner Information</u>		
GRANADA HOUSE				ANIOL III LLC		
457 GRANADA				750 RUSK AVE		
NEW BRAUNFELS		TX	78130	NEW BRAUNFELS TX		78130
Phone	(830) 620-0025	Fax	(830) 629-2373	PHONE: (713) 271-7777		FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE: ICF/IID
Cert Alzh Capacity:	0	TITLE19:	0	SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/01/2017	
County	COMAL	Reg Svcs:		TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:		Facility ID:	007233	<u>Owner Information</u>		
MARIGOLD HOUSE				ANIOL III LLC		
1639 MARIGOLD				750 RUSK AVE		
NEW BRAUNFELS		TX	78130	NEW BRAUNFELS TX		78130
Phone	(830) 620-9604	Fax	(830) 629-2373	PHONE: (713) 271-7777		FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE: ICF/IID
Cert Alzh Capacity:	0	TITLE19:	0	SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/01/2017	
County	COMAL	Reg Svcs:		TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:		Facility ID:	007232	<u>Owner Information</u>		
RAPIDS HOUSE				ANIOL III LLC		
1220 RAPIDS RD				750 RUSK AVE		
NEW BRAUNFELS		TX	78130	NEW BRAUNFELS TX		78130
Phone	(830) 620-0759	Fax	(830) 629-2373	PHONE: (713) 271-7777		FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE: ICF/IID
Cert Alzh Capacity:	0	TITLE19:	0	SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/01/2017	
County	COMAL	Reg Svcs:		TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:		Facility ID:	003811	<u>Owner Information</u>		
RIVER GARDENS				ANIOL III LLC		
750 RUSK AVE				750 RUSK AVE		
NEW BRAUNFELS		TX	78130	NEW BRAUNFELS TX		78130
Phone	(830) 629-4400	Fax	(830) 629-2373	PHONE: (713) 271-7777		FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	160	PROGRAM TYPE: ICF/IID
Cert Alzh Capacity:	0	TITLE19:	0	SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/01/2017	

County	COMAL		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007241		<u>Owner Information</u>			
SPRINGHILL HOUSE					ANIOL III LLC			
984 SPRINGHILL DR					750 RUSK AVE			
NEW BRAUNFELS		TX	78130		NEW BRAUNFELS		TX	78130
Phone	(830) 629-7545	Fax	(830) 629-2373		PHONE:	(713) 271-7777		FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE
Cert Alzh Capacity:	0	TITLE19:	0					
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		09/01/2017		
County	COMAL		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	003617		<u>Owner Information</u>			
TIMBERHILL HOUSE					ANIOL III LLC			
1374 TIMBERHILL					750 RUSK AVE			
NEW BRAUNFELS		TX	78130		NEW BRAUNFELS		TX	78130
Phone	(830) 629-5336	Fax	(830) 629-2373		PHONE:	(713) 271-7777		FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE
Cert Alzh Capacity:	0	TITLE19:	0					
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		09/01/2017		
County	DALLAS		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
Facility Information:		Facility ID:	003968		<u>Owner Information</u>			
MOSAIC					MOSAIC			
2100 CEDAR CIR					428 ST ANDREWS DR			
CARROLLTON		TX	75006		ALLEN		TX	75002
Phone	(972) 418-9989	Fax	(972) 991-0834		PHONE:	(469) 675-1561		FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE
Cert Alzh Capacity:	0	TITLE19:	0					
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		01/01/2017		
County	DALLAS		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
Facility Information:		Facility ID:	003950		<u>Owner Information</u>			
MOSAIC					MOSAIC			
1515 NORTHLAND					428 ST ANDREWS DR			
CARROLLTON		TX	75006		ALLEN		TX	75002
Phone	(972) 866-9989	Fax	(972) 991-0834		PHONE:	(469) 675-1561		FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE
Cert Alzh Capacity:	0	TITLE19:	0					
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		01/01/2017		
County	DALLAS		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
Facility Information:		Facility ID:	003902		<u>Owner Information</u>			
MOSAIC					MOSAIC			
2321 GREENMEADOW					428 ST ANDREWS DR			
CARROLLTON		TX	75006		ALLEN		TX	75002
Phone	(972) 866-9989	Fax	(972) 991-0834		PHONE:	(469) 675-1561		FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE
Cert Alzh Capacity:	0	TITLE19:	0					
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		01/01/2017		
County	DALLAS		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
Facility Information:		Facility ID:	100368		<u>Owner Information</u>			
14 FERRIS CREEK					AUTISTIC TREATMENT CENTER INC			
9814 FERRIS CREEK					10503 METRIC DR			
DALLAS		TX	75243		DALLAS		TX	75243
Phone	(972) 644-7521	Fax	(972) 644-5650		PHONE:	(972) 644-2076		FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE
Cert Alzh Capacity:	0	TITLE19:	0					
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		05/07/2017		

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	100939	<u>Owner Information</u>	
23 FERRIS CREEK				AUTISTIC TREATMENT CENTER INC	
12323 FERRIS CREEK				10503 METRIC DR	
DALLAS		TX	75243	DALLAS	TX 75243
Phone	(972) 644-2079	Fax	(972) 644-5650	PHONE:	(972) 644-2076 FAX: (972) 644-5650
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	07/01/2018
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	010175	<u>Owner Information</u>	
27 FERRIS CREEK				AUTISTIC TREATMENT CENTER INC	
12327 FERRIS CREEK				10503 METRIC DR	
DALLAS		TX	75243	DALLAS	TX 75243
Phone	(972) 644-1064	Fax	(972) 644-5650	PHONE:	(972) 644-2076 FAX: (972) 644-5650
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	07/23/2017
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	100362	<u>Owner Information</u>	
ABILITY CONNECTION TEXAS JUBILEE HOUSE				ABILITY CONNECTION TEXAS	
3108 JUBILEE TR				8802 HARRY HINES BLVD	
DALLAS		TX	75229	DALLAS	TX 75235-1716
Phone	(214) 350-0282	Fax	(214) 247-4505	PHONE:	(214) 247-4505 FAX: (214) 279-5378
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	12/01/2016
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007321	<u>Owner Information</u>	
BRADDOCK HOUSE				COMMUNITY ACCESS INC	
6520 BRADDOCK PL				2040 SHILOH RD	
DALLAS		TX	75232	TYLER	TX 75703
Phone	(214) 339-1914	Fax	(903) 454-3363	PHONE:	(903) 579-8527 FAX: (903) 526-0881
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	06/01/2017
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	003756	<u>Owner Information</u>	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
5922 LEWISBURG				9901 LINN STATION RD	
DALLAS		TX	75237	LOUISVILLE	KY 40223
Phone	(972) 283-9057	Fax	(972) 929-1145	PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	04/01/2018
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007374	<u>Owner Information</u>	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
3111 LEHARVE				9901 LINN STATION RD	
DALLAS		TX	75211	LOUISVILLE	KY 40223
Phone	(214) 467-9462	Fax	(214) 333-2010	PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	05/01/2018



County	DALLAS			Reg Svcs:	IID TEAM			Region	03 - ARLINGTON		
Facility Information:		Facility ID:		003835		<u>Owner Information</u>					
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS							
14255 HAYMEADOW DRIVE				9901 LINN STATION RD							
DALLAS		TX	75240	LOUISVILLE		KY	40223				
Phone	(972) 239-6643		Fax	(972) 239-7421		PHONE:		(502) 394-2100		FAX:	(502) 394-2285
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		04/01/2018			

County	DALLAS			Reg Svcs:	IID TEAM			Region	03 - ARLINGTON		
Facility Information:		Facility ID:		003796		<u>Owner Information</u>					
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS							
14163 HAYMEADOW DR				9901 LINN STATION RD							
DALLAS		TX	75240	LOUISVILLE		KY	40223				
Phone	(972) 386-0402		Fax	(972) 239-7420		PHONE:		(502) 394-2100		FAX:	(502) 394-2285
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		04/01/2018			

County	DALLAS			Reg Svcs:	IID TEAM			Region	03 - ARLINGTON		
Facility Information:		Facility ID:		003783		<u>Owner Information</u>					
HENRY HOUSE				MONARCH HOLDING INC							
7153 PINEBERRY				812 LIVE OAK							
DALLAS		TX	75249	DE SOTO		TX	75115				
Phone	(972) 780-9388		Fax	(972) 224-0904		PHONE:		(972) 780-9388		FAX:	(972) 224-0904
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		10			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		09/01/2017			

County	DALLAS			Reg Svcs:	IID TEAM			Region	03 - ARLINGTON		
Facility Information:		Facility ID:		104764		<u>Owner Information</u>					
ST NICHOLAS OPERATIONS LLC				ST NICHOLAS OPERATIONS LLC							
4612 HEATHERBROOK DR				4612 HEATHERBROOK DR							
DALLAS		TX	75244	DALLAS		TX	75244				
Phone	(792) 239-0121		Fax	(214) 723-5331		PHONE:		(972) 233-4366		FAX:	(214) 922-4144
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		02/22/2018			

County	DALLAS			Reg Svcs:	IID TEAM			Region	03 - ARLINGTON		
Facility Information:		Facility ID:		104131		<u>Owner Information</u>					
DEVONSHIRE HOME				DAYBREAK INC							
1225 DEVONSHIRE				517 MEADOW HILL							
DESOTO		TX	75115	DESOTO		TX	75115				
Phone	(817) 447-2700		Fax	(817) 447-3323		PHONE:		(817) 447-2700		FAX:	(972) 224-0904
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		09/01/2017			

County	DALLAS			Reg Svcs:	IID TEAM			Region	03 - ARLINGTON		
Facility Information:		Facility ID:		007252		<u>Owner Information</u>					
LIVE OAK				MONARCH HOLDING INC							
812 LIVE OAK				812 LIVE OAK							
DESOTO		TX	75115	DE SOTO		TX	75115				
Phone	(972) 224-8530		Fax	(972) 224-0904		PHONE:		(972) 780-9388		FAX:	(972) 224-0904
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		09/01/2017			

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 104122	Owner Information			
MEADOW HILL HOME		DAYBREAK INC			
517 MEADOW HILL		517 MEADOW HILL			
DESOTO	TX 75115	DESOTO TX 75115			
Phone (817) 477-2700	Fax (972) 224-0904	PHONE: (817) 447-2700 FAX: (972) 224-0904			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 09/01/2017			
PRIVATE Beds: 0	TITLE 18/19: 0				
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007651	Owner Information			
PRAIRIE CREEK		DAYBREAK INC			
920 PRAIRIE CREEK DR		517 MEADOW HILL			
DESOTO	TX 75115	DESOTO TX 75115			
Phone (972) 223-1463	Fax (972) 224-0904	PHONE: (817) 447-2700 FAX: (972) 224-0904			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 09/01/2017			
PRIVATE Beds: 0	TITLE 18/19: 0				
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007652	Owner Information			
TATE		DAYBREAK INC			
525 TATE DR		517 MEADOW HILL			
DESOTO	TX 75115	DESOTO TX 75115			
Phone (972) 223-6259	Fax (972) 224-0904	PHONE: (817) 447-2700 FAX: (972) 224-0904			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 09/01/2017			
PRIVATE Beds: 0	TITLE 18/19: 0				
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003890	Owner Information			
VALLEY GLEN		GREENBREAK INC			
219 VALLEY GLEN		234 BARRY LANE			
DESOTO	TX 75115	LANCASTER TX 75146			
Phone (972) 230-4643	Fax (972) 224-0904	PHONE: (972) 227-5900 FAX: (972) 224-0904			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 09/01/2017			
PRIVATE Beds: 0	TITLE 18/19: 0				
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003846	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
402 W VINYARD		9901 LINN STATION RD			
DUNCANVILLE	TX 75137	LOUISVILLE KY 40223			
Phone (972) 296-7278	Fax (972) 286-9057	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007644	Owner Information			
EVERGREEN HIDDEN COURT COMMUNITY HOME		EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC			
5322 HIDDEN CT		10810 SANDEN DR			
GARLAND	TX 75043	DALLAS TX 75238			
Phone (972) 226-8129	Fax (972) 386-9509	PHONE: (972) 386-4834 FAX:			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 07/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	DALLAS		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
Facility Information:		Facility ID:	007812		<u>Owner Information</u>			
EVERGREEN LIGHTHOUSE COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC				
1205 WENDELL WAY				10810 SANDEN DR				
GARLAND		TX	75043		DALLAS TX 75238			
Phone	(972) 303-0198		Fax					
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PHONE:	(972) 386-4834	FAX:
Cert Alzh Capacity:	0	TITLE19:	0			PROGRAM TYPE:	ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 06/11/2017				
County	DALLAS		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
Facility Information:		Facility ID:	007640		<u>Owner Information</u>			
EVERGREEN PEBBLECREEK COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC				
530 PEBBLECREEK DR				10810 SANDEN DR				
GARLAND		TX	75041		DALLAS TX 75238			
Phone	(972) 496-9243		Fax	(972) 386-9509				
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PHONE:	(972) 386-4834	FAX:
Cert Alzh Capacity:	0	TITLE19:	0			PROGRAM TYPE:	ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 07/01/2018				
County	DALLAS		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
Facility Information:		Facility ID:	007813		<u>Owner Information</u>			
EVERGREEN PYRAMID COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC				
706 PYRAMID				10810 SANDEN DR				
GARLAND		TX	75040		DALLAS TX 75238			
Phone	(972) 495-0077		Fax	(972) 386-9509				
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PHONE:	(972) 386-4834	FAX:
Cert Alzh Capacity:	0	TITLE19:	0			PROGRAM TYPE:	ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 08/05/2018				
County	DALLAS		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
Facility Information:		Facility ID:	007621		<u>Owner Information</u>			
KNOLL POINT PLACE, LLC				KNOLL POINT PLACE, LLC				
3446 KNOLL POINT DR				3446 KNOLL POINT DR				
GARLAND		TX	75043		GARLAND TX 75043			
Phone	(972) 226-2620		Fax	(972) 226-2620				
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PHONE:	(214) 384-9775	FAX: (972) 226-2620
Cert Alzh Capacity:	0	TITLE19:	0			PROGRAM TYPE:	ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 08/01/2018				
County	DALLAS		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
Facility Information:		Facility ID:	007404		<u>Owner Information</u>			
TRINITY MANOR				TRINITY ICF MR INC				
2813 COUNTRY VALLEY RD				2813 COUNTRY VALLEY RD				
GARLAND		TX	75043		GARLAND TX 75043			
Phone	(972) 202-9700		Fax	(469) 298-3736				
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PHONE:	(972) 412-4990	FAX: (972) 412-4402
Cert Alzh Capacity:	0	TITLE19:	0			PROGRAM TYPE:	ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 02/28/2017				
County	DALLAS		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
Facility Information:		Facility ID:	007333		<u>Owner Information</u>			
1102 FORT SCOTT TRAIL				CALAB INC				
1102 FORT SCOTT TRAIL				3803 S ROBINSON RD				
GRAND PRAIRIE		TX	75052		GRAND PRAIRIE TX 75052-1239			
Phone	(972) 988-1217		Fax	(972) 606-4792				
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PHONE:	(972) 263-2112	FAX: (972) 263-2115
Cert Alzh Capacity:	0	TITLE19:	0			PROGRAM TYPE:	ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 09/01/2017				

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007266	<u>Owner Information</u>	
3502 GLENDA				CALAB INC	
3502 GLENDA				3803 S ROBINSON RD	
GRAND PRAIRIE		TX	75051	GRAND PRAIRIE	TX 75052-1239
Phone	(972) 263-6621	Fax	(972) 606-4792	PHONE:	(972) 263-2112 FAX: (972) 263-2115
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/01/2017
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007531	<u>Owner Information</u>	
AMICUS AT WOODSIDE				AMICUS, INC	
2213 WOODSIDE DR				1129 N LITTLE SCHOOL RD	
GRAND PRAIRIE		TX	75051	ARLINGTON	TX 76017-1900
Phone	(972) 988-9336	Fax	(817) 563-7906	PHONE:	(817) 563-7900 FAX: (817) 563-7906
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2018
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007615	<u>Owner Information</u>	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
4925 EMBERS TRAIL				9901 LINN STATION RD	
GRAND PRAIRIE		TX	75052	LOUISVILLE	KY 40223
Phone	(972) 647-0517	Fax		PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2018
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007642	<u>Owner Information</u>	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
1829 ANNA DR				9901 LINN STATION RD	
IRVING		TX	75061	LOUISVILLE	KY 40223
Phone	(972) 445-2250	Fax	(972) 445-1695	PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2018
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007641	<u>Owner Information</u>	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
917 APPLE TREE CT				9901 LINN STATION RD	
IRVING		TX	75061	LOUISVILLE	KY 40223
Phone	(972) 445-1856	Fax		PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2018
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	003736	<u>Owner Information</u>	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
2616 ALAN A DALE				9901 LINN STATION RD	
IRVING		TX	75061	LOUISVILLE	KY 40223
Phone	(972) 600-9535	Fax		PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	04/01/2018

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007810	<u>Owner Information</u>	
FULTON COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
2501 CRESTVIEW				9901 LINN STATION ROAD	
IRVING		TX	75062	LOUISVILLE KY 40223-3808	
Phone	(972) 252-1087	Fax		PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	10/13/2017
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007497	<u>Owner Information</u>	
MAYKUS COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
600 MAYKUS CT				9901 LINN STATION ROAD	
IRVING		TX	75061	LOUISVILLE KY 40223-3808	
Phone	(972) 251-4252	Fax		PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2019
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007503	<u>Owner Information</u>	
RINDIE COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
1701 RINDIE ST				9901 LINN STATION ROAD	
IRVING		TX	75060-5925	LOUISVILLE KY 40223-3808	
Phone	(972) 254-1332	Fax		PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2019
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	003947	<u>Owner Information</u>	
BARRY LANE				GREENBREAK INC	
234 BARRY LANE				234 BARRY LANE	
LANCASTER		TX	75146	LANCASTER TX 75146	
Phone	(972) 227-5900	Fax	(214) 224-0904	PHONE:	(972) 227-5900 FAX: (972) 224-0904
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/01/2017
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	003666	<u>Owner Information</u>	
WILLOWOOD				MONARCH HOLDING INC	
731 WILLOWOOD				812 LIVE OAK	
LANCASTER		TX	75146	DE SOTO TX 75115	
Phone	(972) 227-5123	Fax	(972) 224-0904	PHONE:	(972) 780-9388 FAX: (972) 224-0904
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/01/2017
County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	003620	<u>Owner Information</u>	
EASTBROOK HOUSE				CALAB INC	
3313 EASTBROOK DR				3803 S ROBINSON RD	
MESQUITE		TX	75150	GRAND PRAIRIE TX 75052-1239	
Phone	(972) 686-9478	Fax	(972) 606-4792	PHONE:	(972) 263-2112 FAX: (972) 263-2115
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/01/2018

County	DALLAS		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
Facility Information:		Facility ID:	007645		<u>Owner Information</u>			
EVERGREEN ISLANDVIEW COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC				
1901 ISLAND VIEW				10810 SANDEN DR				
MESQUITE		TX	75149		DALLAS TX 75238			
Phone	(972) 285-1061		Fax	(972) 386-9509		PHONE:	(972) 386-4834 FAX:	
TOTAL Lic Capacity:	0		TITLE 18:	0		ICF/IID:	6	
Cert Alzh Capacity:	0		TITLE19:	0		PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds:	0		TITLE 18/19:	0		License Exp Dt:	07/01/2018	
County	DALLAS		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
Facility Information:		Facility ID:	007647		<u>Owner Information</u>			
EVERGREEN VALLEY CREEK COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC				
907 VALLEYCREEK DR				10810 SANDEN DR				
MESQUITE		TX	75181-2355		DALLAS TX 75238			
Phone	(972) 222-6622		Fax	(972) 386-9509		PHONE:	(972) 386-4834 FAX:	
TOTAL Lic Capacity:	0		TITLE 18:	0		ICF/IID:	6	
Cert Alzh Capacity:	0		TITLE19:	0		PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds:	0		TITLE 18/19:	0		License Exp Dt:	07/01/2018	
County	DALLAS		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
Facility Information:		Facility ID:	003987		<u>Owner Information</u>			
HARMAN HOUSE				CALAB INC				
4237 ASHWOOD DR				3803 S ROBINSON RD				
MESQUITE		TX	75150		GRAND PRAIRIE TX 75052-1239			
Phone	(972) 613-7635		Fax	(972) 606-4792		PHONE:	(972) 263-2112 FAX: (972) 263-2115	
TOTAL Lic Capacity:	0		TITLE 18:	0		ICF/IID:	6	
Cert Alzh Capacity:	0		TITLE19:	0		PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds:	0		TITLE 18/19:	0		License Exp Dt:	09/01/2018	
County	DALLAS		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
Facility Information:		Facility ID:	007800		<u>Owner Information</u>			
ABILITY CONNECTION TEXAS ABILITY HOUSE				ABILITY CONNECTION TEXAS				
615-617 WOODHAVEN PL				8802 HARRY HINES BLVD				
RICHARDSON		TX	75080		DALLAS TX 75235-1716			
Phone	(214) 247-4505		Fax	(214) 279-5378		PHONE:	(214) 247-4505 FAX: (214) 279-5378	
TOTAL Lic Capacity:	0		TITLE 18:	0		ICF/IID:	6	
Cert Alzh Capacity:	0		TITLE19:	0		PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds:	0		TITLE 18/19:	0		License Exp Dt:	04/30/2018	
County	DALLAS		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
Facility Information:		Facility ID:	003994		<u>Owner Information</u>			
ABILITY CONNECTION TEXAS WENTWORTH HOUSE				ABILITY CONNECTION TEXAS				
642 WENTWORTH DR				8802 HARRY HINES BLVD				
RICHARDSON		TX	75081-5622		DALLAS TX 75235-1716			
Phone	(214) 247-4505		Fax	(214) 755-1735		PHONE:	(214) 247-4505 FAX: (214) 279-5378	
TOTAL Lic Capacity:	0		TITLE 18:	0		ICF/IID:	6	
Cert Alzh Capacity:	0		TITLE19:	0		PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds:	0		TITLE 18/19:	0		License Exp Dt:	03/29/2018	
County	DALLAS		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
Facility Information:		Facility ID:	007280		<u>Owner Information</u>			
MOSAIC				MOSAIC				
1509 VERSAILLES				428 ST ANDREWS DR				
RICHARDSON		TX	75081		ALLEN TX 75002			
Phone	(972) 866-9989		Fax	(972) 991-0834		PHONE:	(469) 675-1561 FAX: (469) 675-1562	
TOTAL Lic Capacity:	0		TITLE 18:	0		ICF/IID:	6	
Cert Alzh Capacity:	0		TITLE19:	0		PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds:	0		TITLE 18/19:	0		License Exp Dt:	01/01/2017	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	003901	<u>Owner Information</u>	
MOSAIC				MOSAIC	
1809 AUBURN				428 ST ANDREWS DR	
RICHARDSON		TX	75081	ALLEN	TX 75002
Phone	(972) 866-9989	Fax	(972) 991-0834	PHONE:	(469) 675-1561 FAX: (469) 675-1562
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2017
County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007667	<u>Owner Information</u>	
BELL COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED	
2402 BERNARD				33 CYPRESS BLVD ,SUITE 100	
DENTON		TX	76205	ROUND ROCK	TX 78665
Phone	(940) 387-1314	Fax	(940) 566-2371	PHONE:	(512) 336-0800 FAX: (512) 336-0812
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	03/15/2018
County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	003922	<u>Owner Information</u>	
CANDLEBERRY				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
2721 THUNDERBIRD ST				9901 LINN STATION RD	
DENTON		TX	76201	LOUISVILLE	KY 40223
Phone	(940) 566-1079	Fax	(940) 382-9521	PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	10/01/2017
County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007668	<u>Owner Information</u>	
CARTER COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED	
3805 CAMELOT				33 CYPRESS BLVD ,SUITE 100	
DENTON		TX	76205	ROUND ROCK	TX 78665
Phone	(940) 382-4216	Fax		PHONE:	(512) 336-0800 FAX: (512) 336-0812
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	03/15/2018
County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007670	<u>Owner Information</u>	
DAVIS COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED	
1426 RUDELL				33 CYPRESS BLVD ,SUITE 100	
DENTON		TX	76201	ROUND ROCK	TX 78665
Phone	(940) 566-8631	Fax		PHONE:	(512) 336-0800 FAX: (512) 336-0812
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	03/15/2018
County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007102	<u>Owner Information</u>	
DENTON STATE SUPPORTED LIVING CENTER				DADS	
3980 STATE SCHOOL RD HW 35 E				PO BOX 12668	
DENTON		TX	76202	AUSTIN	TX 78711
Phone	(940) 891-0342	Fax	(940) 591-3300	PHONE:	(512) 454-3761 FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	716
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE STATE SCHOOL/STATE CENTER
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	

County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007206	<b>Owner Information</b>	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
7501 RIVERCHASE TRL				9901 LINN STATION RD	
DENTON				LOUISVILLE KY 40223	
<b>Phone</b>	(940) 382-7900	<b>Fax</b>		<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	04/01/2018
County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007247	<b>Owner Information</b>	
EDUCARE COMMUNITY LIVING CORPORATION-TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
3612 BIG HORN TRL				9901 LINN STATION RD	
DENTON				LOUISVILLE KY 40223	
<b>Phone</b>	(940) 383-1520	<b>Fax</b>		<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	03/18/2018
County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007669	<b>Owner Information</b>	
NEWTON COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED	
3112 CEDAR HILL				33 CYPRESS BLVD ,SUITE 100	
DENTON				ROUND ROCK TX 78665	
<b>Phone</b>	(940) 566-6746	<b>Fax</b>		<b>PHONE:</b>	(512) 336-0800
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	03/15/2018
County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007671	<b>Owner Information</b>	
OAKBEND COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED	
1430 N RUDELL				33 CYPRESS BLVD ,SUITE 100	
DENTON				ROUND ROCK TX 78665	
<b>Phone</b>	(940) 387-0831	<b>Fax</b>		<b>PHONE:</b>	(512) 336-0800
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	03/15/2018
County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007442	<b>Owner Information</b>	
OAKRIDGE GROUP HOME				INNOVATIVE OUTCOMES INC	
2421 OAKRIDGE				2100 PARKSIDE DR	
DENTON				DENTON TX 76201	
<b>Phone</b>	(940) 387-9710	<b>Fax</b>	(940) 387-7508	<b>PHONE:</b>	(940) 383-8367
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2019
County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	003805	<b>Owner Information</b>	
SANDY OAKS I				INNOVATIVE OUTCOMES INC	
1475 S TRINITY RD				2100 PARKSIDE DR	
DENTON				DENTON TX 76201	
<b>Phone</b>	(940) 383-1907	<b>Fax</b>	(940) 381-0854	<b>PHONE:</b>	(940) 383-8367
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	13
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2019



County	DENTON		Reg Svcs:		IID TEAM		Region		03 - ARLINGTON	
Facility Information:		Facility ID:		003837		<u>Owner Information</u>				
SANDY OAKS II						INNOVATIVE OUTCOMES INC				
1475 S TRINITY RD						2100 PARKSIDE DR				
DENTON		TX	76208			DENTON		TX	76201	
Phone	(940) 387-1508	Fax	(940) 381-0854			PHONE:		(940) 383-8367	FAX:	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 13		PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:		01/03/2019		
PRIVATE Beds:	0	TITLE 18/19:	0							
County	DENTON		Reg Svcs:		IID TEAM		Region		03 - ARLINGTON	
Facility Information:		Facility ID:		007489		<u>Owner Information</u>				
COUNTRY HOME						WANDA D DENT				
901 CROSS TIMBERS DR						901 CROSS TIMBERS DR				
DOUBLE OAK		TX	75077			DOUBLE OAK		TX	75077	
Phone	(972) 539-2557	Fax	(877) 203-9287			PHONE:		(972) 539-2557	FAX: (877) 203-9287	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:		12/18/2017		
PRIVATE Beds:	0	TITLE 18/19:	0							
County	DENTON		Reg Svcs:		IID TEAM		Region		03 - ARLINGTON	
Facility Information:		Facility ID:		003886		<u>Owner Information</u>				
LAUREL HOUSE						EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				
50 N SHARON DR						9901 LINN STATION RD				
KRUM		TX	76249			LOUISVILLE		KY	40223	
Phone	(817) 482-6400	Fax	(940) 382-9521			PHONE:		(502) 394-2100	FAX: (502) 394-2285	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:		10/01/2017		
PRIVATE Beds:	0	TITLE 18/19:	0							
County	DENTON		Reg Svcs:		IID TEAM		Region		03 - ARLINGTON	
Facility Information:		Facility ID:		003894		<u>Owner Information</u>				
PINON HOUSE						EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				
4520 MILLER ROAD						9901 LINN STATION RD				
KRUM		TX	76249-6811			LOUISVILLE		KY	40223	
Phone	(817) 387-1265	Fax				PHONE:		(502) 394-2100	FAX: (502) 394-2285	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:		10/01/2017		
PRIVATE Beds:	0	TITLE 18/19:	0							
County	DENTON		Reg Svcs:		IID TEAM		Region		03 - ARLINGTON	
Facility Information:		Facility ID:		003640		<u>Owner Information</u>				
PONDEROSA						EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				
9554 RECTOR ROAD						9901 LINN STATION RD				
SANGER		TX	76266			LOUISVILLE		KY	40223	
Phone	(940) 458-4684	Fax				PHONE:		(502) 394-2100	FAX: (502) 394-2285	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:		01/23/2018		
PRIVATE Beds:	0	TITLE 18/19:	0							
County	EASTLAND		Reg Svcs:		ICF/IID		Region		02 - ABILENE	
Facility Information:		Facility ID:		003814		<u>Owner Information</u>				
ROCK HOUSE SPRINGS						ROCK HOUSE SUPPORT SERVICES INC				
1105 LAGO VISTA						2252 LINGLEVILLE ROAD HWY 8				
EASTLAND		TX	76448			STEPHENVILLE		TX	76401	
Phone	(254) 629-8671	Fax	(254) 629-8610			PHONE:		(254) 968-4004	FAX: (254) 965-8653	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 13		PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:		08/01/2018		
PRIVATE Beds:	0	TITLE 18/19:	0							

County	EASTLAND		Reg Svcs:		ICF/IID		Region		02 - ABILENE	
Facility Information:			Facility ID:		007650		<u>Owner Information</u>			
ROCK HOUSE SPRINGS II							ROCK HOUSE SUPPORT SERVICES INC			
401 LENS							2252 LINGLEVILLE ROAD HWY 8			
EASTLAND			TX		76448		STEPHENVILLE		TX 76401	
Phone (254) 629-8689			Fax		(254) 629-8610		PHONE:		(254) 968-4004 FAX: (254) 965-8653	
TOTAL Lic Capacity: 0			TITLE 18:		0		ICF/IID: 6			
Cert Alzh Capacity: 0			TITLE19:		0		PROGRAM TYPE:		ICF/IID SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds: 0			TITLE 18/19:		0		License Exp Dt:		08/01/2018	
County	ECTOR		Reg Svcs:		ICF/IID		Region		09 - ABILENE	
Facility Information:			Facility ID:		003757		<u>Owner Information</u>			
MARIAH FLATS							D & S RESIDENTIAL SERVICES LP			
10036 W WESTLAND DR							8911 N CAPITAL OF TX HWY		,BLDG 1 STE 1300	
ODESSA			TX		79764		AUSTIN		TX 78759	
Phone (432) 381-0741			Fax		(512) 327-5355		PHONE:		(512) 327-2325 FAX: (512) 327-5355	
TOTAL Lic Capacity: 0			TITLE 18:		0		ICF/IID: 10			
Cert Alzh Capacity: 0			TITLE19:		0		PROGRAM TYPE:		ICF/IID SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds: 0			TITLE 18/19:		0		License Exp Dt:		12/01/2017	
County	ECTOR		Reg Svcs:		ICF/IID		Region		09 - ABILENE	
Facility Information:			Facility ID:		003616		<u>Owner Information</u>			
MORRIS HOUSE							PERMIAN BASIN MHMR			
5256 MORRIS ST							401 E ILLINOIS AVE		,STE 401	
ODESSA			TX		79764		MIDLAND		TX 79701	
Phone (432) 530-2267			Fax				PHONE:		(432) 570-3385 FAX:	
TOTAL Lic Capacity: 0			TITLE 18:		0		ICF/IID: 6			
Cert Alzh Capacity: 0			TITLE19:		0		PROGRAM TYPE:		ICF/IID SERVICE TYPE GOVERNMENT BASED	
PRIVATE Beds: 0			TITLE 18/19:		0		License Exp Dt:			
County	ECTOR		Reg Svcs:		ICF/IID		Region		09 - ABILENE	
Facility Information:			Facility ID:		007238		<u>Owner Information</u>			
PARKER HOUSE							ROCK HOUSE SUPPORT SERVICES INC			
1510 PARKER DR							2252 LINGLEVILLE ROAD HWY 8			
ODESSA			TX		79761		STEPHENVILLE		TX 76401	
Phone (432) 362-3072			Fax		(432) 682-6167		PHONE:		(254) 968-4004 FAX: (254) 965-8653	
TOTAL Lic Capacity: 0			TITLE 18:		0		ICF/IID: 6			
Cert Alzh Capacity: 0			TITLE19:		0		PROGRAM TYPE:		ICF/IID SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds: 0			TITLE 18/19:		0		License Exp Dt:		10/01/2018	
County	EL PASO		Reg Svcs:		ICF/IID		Region		10 - EL PASO	
Facility Information:			Facility ID:		003880		<u>Owner Information</u>			
CASA BAGDAD							EL PASO COMMUNITY MHMR CENTER			
5713 BAGDAD							PO BOX 9997			
EL PASO			TX		79924		EL PASO		TX 79990	
Phone (915) 562-5721			Fax		(915) 351-4703		PHONE:		FAX:	
TOTAL Lic Capacity: 0			TITLE 18:		0		ICF/IID: 6			
Cert Alzh Capacity: 0			TITLE19:		0		PROGRAM TYPE:		ICF/IID SERVICE TYPE GOVERNMENT BASED	
PRIVATE Beds: 0			TITLE 18/19:		0		License Exp Dt:			
County	EL PASO		Reg Svcs:		ICF/IID		Region		10 - EL PASO	
Facility Information:			Facility ID:		003834		<u>Owner Information</u>			
CASA DE LA PROMESA							EL PASO COMMUNITY MHMR CENTER			
5310 BLANCO ST							PO BOX 9997			
EL PASO			TX		79990		EL PASO		TX 79990	
Phone (915) 778-0879			Fax				PHONE:		FAX:	
TOTAL Lic Capacity: 0			TITLE 18:		0		ICF/IID: 8			
Cert Alzh Capacity: 0			TITLE19:		0		PROGRAM TYPE:		ICF/IID SERVICE TYPE GOVERNMENT BASED	
PRIVATE Beds: 0			TITLE 18/19:		0		License Exp Dt:			

County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
<b>Facility Information:</b>		<b>Facility ID:</b>	003918	<b>Owner Information</b>	
CASA NORTON				EL PASO COMMUNITY MHMR CENTER	
8824 NORTON				PO BOX 9997	
EL PASO		<b>TX</b>	79904		
<b>Phone</b>	(915) 759-2867	<b>Fax</b>		EL PASO	TX 79990
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PHONE:</b>	<b>FAX:</b>
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	GOVERNMENT BASED
				<b>License Exp Dt:</b>	
County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
<b>Facility Information:</b>		<b>Facility ID:</b>	007116	<b>Owner Information</b>	
EL PASO STATE SUPPORTED LIVING CENTER				DADS	
6700 DELTA DRIVE				PO BOX 12668	
EL PASO		<b>TX</b>	79905		
<b>Phone</b>	(915) 782-6300	<b>Fax</b>	(915) 782-6336	AUSTIN	TX 78711
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	155
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PHONE:</b>	(512) 454-3761
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	STATE SCHOOL/STATE CENTER
				<b>License Exp Dt:</b>	
County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
<b>Facility Information:</b>		<b>Facility ID:</b>	003873	<b>Owner Information</b>	
NEW HOPE COMMUNITY LIVING III				DECEMBER NINE COMPANY LTD	
3204 DUNDEE ST				20 FOUNDERS BLVD	
EL PASO		<b>TX</b>	79925		
<b>Phone</b>	(915) 591-3779	<b>Fax</b>	(915) 843-7784	EL PASO	TX 79906
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PHONE:</b>	(915) 843-7773
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	03/01/2018
County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
<b>Facility Information:</b>		<b>Facility ID:</b>	003876	<b>Owner Information</b>	
NEW HOPE COMMUNITY LIVING IV				DECEMBER NINE COMPANY LTD	
11608 BLUEBONNET CT				20 FOUNDERS BLVD	
EL PASO		<b>TX</b>	79936		
<b>Phone</b>	(915) 581-3515	<b>Fax</b>	(915) 843-7784	EL PASO	TX 79906
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PHONE:</b>	(915) 843-7773
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	09/29/2017
County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
<b>Facility Information:</b>		<b>Facility ID:</b>	007299	<b>Owner Information</b>	
NEW HOPE COMMUNITY LIVING IX				DECEMBER NINE COMPANY LTD	
4740 ROUND ROCK				20 FOUNDERS BLVD	
EL PASO		<b>TX</b>	79924		
<b>Phone</b>	(915) 843-7773	<b>Fax</b>	(915) 843-7784	EL PASO	TX 79906
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PHONE:</b>	(915) 843-7773
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	02/24/2017
County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
<b>Facility Information:</b>		<b>Facility ID:</b>	003877	<b>Owner Information</b>	
NEW HOPE COMMUNITY LIVING V				DECEMBER NINE COMPANY LTD	
7721 INCA AVE				20 FOUNDERS BLVD	
EL PASO		<b>TX</b>	79912		
<b>Phone</b>	(915) 833-3479	<b>Fax</b>	(915) 843-7784	EL PASO	TX 79906
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PHONE:</b>	(915) 843-7773
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
				<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	03/01/2018

County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
<b>Facility Information:</b>		<b>Facility ID:</b>	003932	<b>Owner Information</b>	
NEW HOPE COMMUNITY LIVING VI				DECEMBER NINE COMPANY LTD	
10520 SPRINGWOOD				20 FOUNDERS BLVD	
EL PASO		<b>TX</b>	79936	EL PASO TX 79906	
<b>Phone</b>	(915) 843-7773	<b>Fax</b>	(915) 843-7784	<b>PHONE:</b>	(915) 843-7773 <b>FAX:</b> (915) 843-7784
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>License Exp Dt:</b>	09/25/2017
County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
<b>Facility Information:</b>		<b>Facility ID:</b>	003958	<b>Owner Information</b>	
NEW HOPE COMMUNITY LIVING VII				DECEMBER NINE COMPANY LTD	
4216 LA ADELITA DR				20 FOUNDERS BLVD	
EL PASO		<b>TX</b>	79922	EL PASO TX 79906	
<b>Phone</b>	(915) 584-8919	<b>Fax</b>	(915) 544-7773	<b>PHONE:</b>	(915) 843-7773 <b>FAX:</b> (915) 843-7784
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>License Exp Dt:</b>	03/01/2018
County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
<b>Facility Information:</b>		<b>Facility ID:</b>	003614	<b>Owner Information</b>	
NEW HOPE COMMUNITY LIVING VIII				DECEMBER NINE COMPANY LTD	
7850 PECAN COURT				20 FOUNDERS BLVD	
EL PASO		<b>TX</b>	79915	EL PASO TX 79906	
<b>Phone</b>	(915) 772-1052	<b>Fax</b>	(915) 843-7784	<b>PHONE:</b>	(915) 843-7773 <b>FAX:</b> (915) 843-7784
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>License Exp Dt:</b>	03/01/2018
County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
<b>Facility Information:</b>		<b>Facility ID:</b>	003726	<b>Owner Information</b>	
SU CASA				EL PASO COMMUNITY MHMR CENTER	
5314 BLANCO				PO BOX 9997	
EL PASO		<b>TX</b>	79905	EL PASO TX 79990	
<b>Phone</b>	(915) 778-0935	<b>Fax</b>		<b>PHONE:</b>	<b>FAX:</b>
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID <b>SERVICE TYPE</b> GOVERNMENT BASED
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>License Exp Dt:</b>	
County	ELLIS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007588	<b>Owner Information</b>	
BRANDON WAY HOUSE				CEN-TEX ASSOCIATION FOR RETARDED CHILDREN	
209 BRANDON WAY				PO DRAWER 750	
RED OAK		<b>TX</b>	75154	MEXIA TX 76667	
<b>Phone</b>	(972) 617-1219	<b>Fax</b>	(972) 923-1472	<b>PHONE:</b>	(254) 562-2891 <b>FAX:</b> (254) 562-7656
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>License Exp Dt:</b>	02/09/2018
County	ELLIS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007514	<b>Owner Information</b>	
AUBURN HOUSE				CEN-TEX ASSOCIATION FOR RETARDED CHILDREN	
115 AUBURN ST				PO DRAWER 750	
WAXAHACHIE		<b>TX</b>	75165	MEXIA TX 76667	
<b>Phone</b>	(972) 937-5190	<b>Fax</b>	(972) 937-5190	<b>PHONE:</b>	(254) 562-2891 <b>FAX:</b> (254) 562-7656
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>License Exp Dt:</b>	09/17/2018

County	ELLIS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007532	<u>Owner Information</u>	
BRYN MAWR HOUSE				CEN-TEX ASSOCIATION FOR RETARDED CHILDREN	
109 BRYN MAWR				PO DRAWER 750	
WAXAHACHIE		TX	75165	MEXIA	TX 76667
Phone	(972) 923-0748	Fax	(972) 923-1472	PHONE:	(254) 562-2891 FAX: (254) 562-7656
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	05/18/2018
County	ELLIS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007592	<u>Owner Information</u>	
ROCK SPRINGS HOUSE				CEN-TEX ASSOCIATION FOR RETARDED CHILDREN	
206 ROCK SPRINGS				PO DRAWER 750	
WAXAHACHIE		TX	75165	MEXIA	TX 76667
Phone	(972) 937-9486	Fax	(972) 923-1472	PHONE:	(254) 562-2891 FAX: (254) 562-7656
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	03/10/2018
County	ERATH	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007373	<u>Owner Information</u>	
EAST ROCK				ROCK HOUSE SUPPORT SERVICES INC	
1485 BLACKJACK				2252 LINGLEVILLE ROAD HWY 8	
STEPHENVILLE		TX	76401	STEPHENVILLE	TX 76401
Phone	(254) 968-6119	Fax	(254) 968-6033	PHONE:	(254) 968-4004 FAX: (254) 965-8653
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	11/01/2018
County	ERATH	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007552	<u>Owner Information</u>	
HARBIN HOUSE				ROCK HOUSE SUPPORT SERVICES INC	
909 HARBIN DR				2252 LINGLEVILLE ROAD HWY 8	
STEPHENVILLE		TX	76401	STEPHENVILLE	TX 76401
Phone	(254) 965-7016	Fax	(254) 968-6033	PHONE:	(254) 968-4004 FAX: (254) 965-8653
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	11/01/2018
County	ERATH	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	003788	<u>Owner Information</u>	
NORTH ROCK 1				ROCK HOUSE SUPPORT SERVICES INC	
2250 LINGLEVILLE RD				2252 LINGLEVILLE ROAD HWY 8	
STEPHENVILLE		TX	76401	STEPHENVILLE	TX 76401
Phone	(254) 965-6936	Fax	(254) 968-6033	PHONE:	(254) 968-4004 FAX: (254) 965-8653
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	13
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	11/01/2018
County	ERATH	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	003824	<u>Owner Information</u>	
NORTH ROCK 2				ROCK HOUSE SUPPORT SERVICES INC	
2248 LINGLEVILLE ROAD				2252 LINGLEVILLE ROAD HWY 8	
STEPHENVILLE		TX	76401	STEPHENVILLE	TX 76401
Phone	(254) 965-6922	Fax	(254) 968-6033	PHONE:	(254) 968-4004 FAX: (254) 965-8653
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	13
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	11/01/2018

County	ERATH	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	003761	<u>Owner Information</u>		
ROCK HOUSE			ROCK HOUSE SUPPORT SERVICES INC		
2254 LINGLEVILLE RD			2252 LINGLEVILLE ROAD HWY 8		
STEPHENVILLE	TX	76401	STEPHENVILLE TX 76401		
Phone (254) 965-6915	Fax	(254) 968-6033	PHONE: (254) 968-4004 FAX: (254) 965-8653		
TOTAL Lic Capacity: 0	TITLE 18:	0	ICF/IID: 13	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19:	0	License Exp Dt: 11/01/2018		
PRIVATE Beds: 0	TITLE 18/19:	0			
County	ERATH	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	003766	<u>Owner Information</u>		
ROCK HOUSE 2			ROCK HOUSE SUPPORT SERVICES INC		
2326 DENMAN ST			2252 LINGLEVILLE ROAD HWY 8		
STEPHENVILLE	TX	76401	STEPHENVILLE TX 76401		
Phone (254) 968-6357	Fax	(254) 968-6033	PHONE: (254) 968-4004 FAX: (254) 965-8653		
TOTAL Lic Capacity: 0	TITLE 18:	0	ICF/IID: 13	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19:	0	License Exp Dt: 11/01/2018		
PRIVATE Beds: 0	TITLE 18/19:	0			
County	ERATH	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	007423	<u>Owner Information</u>		
WARM SPRINGS			ROCK HOUSE SUPPORT SERVICES INC		
788 N NEBLETT			2252 LINGLEVILLE ROAD HWY 8		
STEPHENVILLE	TX	76401	STEPHENVILLE TX 76401		
Phone (254) 965-2659	Fax	(254) 968-6033	PHONE: (254) 968-4004 FAX: (254) 965-8653		
TOTAL Lic Capacity: 0	TITLE 18:	0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19:	0	License Exp Dt: 11/01/2018		
PRIVATE Beds: 0	TITLE 18/19:	0			
County	FALLS	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID:	007515	<u>Owner Information</u>		
KIOWA HOUSE			CEN-TEX ASSOCIATION FOR RETARDED CHILDREN		
1606 ROBERT E LEE			PO DRAWER 750		
MARLIN	TX	76661	MEXIA TX 76667		
Phone (254) 804-0047	Fax	(254) 562-7656	PHONE: (254) 562-2891 FAX: (254) 562-7656		
TOTAL Lic Capacity: 0	TITLE 18:	0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19:	0	License Exp Dt: 10/01/2017		
PRIVATE Beds: 0	TITLE 18/19:	0			
County	FAYETTE	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID:	007632	<u>Owner Information</u>		
GUY HOUSE			JAMES-LEACH INC		
169 GUY STREET			339 W COLORADO		
LA GRANGE	TX	78945	LA GRANGE TX 78945		
Phone (979) 968-8068	Fax	(979) 968-5210	PHONE: (979) 968-8502 FAX: (979) 968-5210		
TOTAL Lic Capacity: 0	TITLE 18:	0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19:	0	License Exp Dt: 11/07/2018		
PRIVATE Beds: 0	TITLE 18/19:	0			
County	FAYETTE	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID:	003682	<u>Owner Information</u>		
MAIN STREET COMMUNITY RESIDENCE			KENMAR RESIDENTIAL SERVICES INCORPORATED		
520 N MAIN			33 CYPRESS BLVD ,SUITE 100		
LA GRANGE	TX	78945	ROUND ROCK TX 78665		
Phone (409) 968-6188	Fax		PHONE: (512) 336-0800 FAX: (512) 336-0812		
TOTAL Lic Capacity: 0	TITLE 18:	0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19:	0	License Exp Dt: 03/15/2018		
PRIVATE Beds: 0	TITLE 18/19:	0			

County	FAYETTE			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN										
Facility Information:		Facility ID:		007227		<u>Owner Information</u>													
MONROE COMMUNITY RESIDENCE						KENMAR RESIDENTIAL SERVICES INCORPORATED													
842 N MONROE						33 CYPRESS BLVD ,SUITE 100													
LA GRANGE						TX		78945		ROUND ROCK TX 78665									
Phone	(979) 968-8821			Fax	(979) 968-8821			PHONE:	(512) 336-0800		FAX:	(512) 336-0812							
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6		PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED	
Cert Alzh Capacity:		0		TITLE19:		0		License Exp Dt:		03/15/2018									
PRIVATE Beds:		0		TITLE 18/19:		0													
County	FAYETTE			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN										
Facility Information:		Facility ID:		003678		<u>Owner Information</u>													
SHADY LANE COMMUNITY RESIDENCE						KENMAR RESIDENTIAL SERVICES INCORPORATED													
124 MEADOW LN						33 CYPRESS BLVD ,SUITE 100													
LA GRANGE						TX		78945		ROUND ROCK TX 78665									
Phone	(979) 968-8822			Fax				PHONE:	(512) 336-0800		FAX:	(512) 336-0812							
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6		PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED	
Cert Alzh Capacity:		0		TITLE19:		0		License Exp Dt:		03/15/2018									
PRIVATE Beds:		0		TITLE 18/19:		0													
County	FAYETTE			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN										
Facility Information:		Facility ID:		007672		<u>Owner Information</u>													
FELICE SCHWARTZ COMMUNITY RESIDENCE						BLUEBONNET TRAILS COMMUNITY MHMR													
2011 W US HWY 90						1111													
SCHULENBURG						TX		78956		TX									
Phone	(409) 743-4490			Fax				PHONE:			FAX:								
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6		PROGRAM TYPE:		ICF/IID		SERVICE TYPE		GOVERNMENT BASED	
Cert Alzh Capacity:		0		TITLE19:		0		License Exp Dt:											
PRIVATE Beds:		0		TITLE 18/19:		0													
County	FAYETTE			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN										
Facility Information:		Facility ID:		007673		<u>Owner Information</u>													
HIRSH SCHWARTZ COMMUNITY RESIDENCE						BLUEBONNET TRAILS COMMUNITY MHMR													
2021 W US HWY 90						1111													
SCHULENBURG						TX		78956		TX									
Phone	(409) 743-4488			Fax				PHONE:			FAX:								
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6		PROGRAM TYPE:		ICF/IID		SERVICE TYPE		GOVERNMENT BASED	
Cert Alzh Capacity:		0		TITLE19:		0		License Exp Dt:											
PRIVATE Beds:		0		TITLE 18/19:		0													
County	FAYETTE			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN										
Facility Information:		Facility ID:		007630		<u>Owner Information</u>													
JUSTICE HOUSE						JAMES-LEACH INC													
706 JUSTICE RD						339 W COLORADO													
WEST POINT						TX		78963		LA GRANGE TX 78945									
Phone	(979) 242-3613			Fax	(979) 968-5210			PHONE:	(979) 968-8502		FAX:	(979) 968-5210							
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6		PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED	
Cert Alzh Capacity:		0		TITLE19:		0		License Exp Dt:		10/07/2018									
PRIVATE Beds:		0		TITLE 18/19:		0													
County	FISHER			Reg Svcs:	ICF/IID			Region	02 - ABILENE										
Facility Information:		Facility ID:		007267		<u>Owner Information</u>													
ANGEL HOUSE I						ANGEL CARE INC													
410 RICHARD						PO BOX 310													
ROTAN						TX		79546		ROTAN TX 79546									
Phone	(325) 735-2049			Fax	(325) 735-3357			PHONE:	(325) 735-2512		FAX:	(325) 735-3357							
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6		PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED	
Cert Alzh Capacity:		0		TITLE19:		0		License Exp Dt:		05/31/2018									
PRIVATE Beds:		0		TITLE 18/19:		0													

County	FISHER	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:		Facility ID:	007463	Owner Information	
ANGEL HOUSE II				ANGEL CARE INC	
712 E 6TH ST				PO BOX 310	
ROTAN		TX	79546	ROTAN	TX 79546
Phone	(325) 735-2099	Fax	(325) 735-3357	PHONE:	(325) 735-2512 FAX: (325) 735-3357
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/17/2017
County	FORT BEND	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:		Facility ID:	007521	Owner Information	
HOUSTON IN A VISION II				HOUSTON IN-A-VISION INC	
3203 CYPRESS POINT DRIVE				3203 CYPRESS POINT DRIVE	
MISSOURI CITY		TX	77459	MISSOURI CITY	TX 77459
Phone	(281) 416-0607	Fax	(713) 271-8585	PHONE:	(281) 416-0607 FAX: (713) 271-8585
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/01/2017
County	FORT BEND	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:		Facility ID:	100346	Owner Information	
BTTC PIN OAK HOUSE				DADS	
1818 COLLINS RD BLDG A				PO BOX 12668	
RICHMOND		TX	77469	AUSTIN	TX 78711
Phone	(281) 239-1122	Fax	(281) 239-1144	PHONE:	(512) 454-3761 FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	
County	FORT BEND	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:		Facility ID:	100373	Owner Information	
BTTC WILLOW GLEN HOUSE				DADS	
1818 COLLINS RD BLDG B				PO BOX 12668	
RICHMOND		TX	77469	AUSTIN	TX 78711
Phone	(281) 239-1122	Fax	(281) 239-1144	PHONE:	(512) 454-3761 FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	
County	FORT BEND	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:		Facility ID:	007106	Owner Information	
RICHMOND STATE SUPPORTED LIVING CENTER				DADS	
2100 PRESTON ROAD				PO BOX 12668	
RICHMOND		TX	77469	AUSTIN	TX 78711
Phone	(281) 232-2075	Fax	(281) 344-4587	PHONE:	(512) 454-3761 FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	664
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE STATE SCHOOL/STATE CENTER
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/14/1992
County	GALVESTON	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:		Facility ID:	003921	Owner Information	
VALERO				EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST	
1813 VALERO				9901 LINN STATION ROAD	
FRIENDSWOOD		TX	77546	LOUISVILLE	KY 40223-3808
Phone	(281) 996-8808	Fax		PHONE:	(512) 498-2700 FAX: (512) 498-2777
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	05/16/2018



County	GONZALES			Reg Svcs:	TEAM ICF-IID			Region	08 - SAN ANTONIO		
Facility Information:		Facility ID:		003781		<u>Owner Information</u>					
GONZALES COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP							
310 DEWITT ST				9901 LINN STATION ROAD							
GONZALES		TX	78629-4210		LOUISVILLE		KY	40223-3808			
Phone	(830) 672-7421		Fax								
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		8			
Cert Alzh Capacity:		0	TITLE19:		0	PHONE:		(502) 394-2100	FAX: (502) 394-2285		
PRIVATE Beds:		0	TITLE 18/19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED		
						License Exp Dt:		01/01/2017			
County	GONZALES			Reg Svcs:	TEAM ICF-IID			Region	08 - SAN ANTONIO		
Facility Information:		Facility ID:		007653		<u>Owner Information</u>					
GONZALES COUNTY COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED							
3221 HWY 87 WEST				33 CYPRESS BLVD							
SMILEY		TX	78159		ROUND ROCK		TX	,SUITE 100			
Phone	(830) 587-6157		Fax	(830) 587-6408				78665			
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PHONE:		(512) 336-0800	FAX: (512) 336-0812		
PRIVATE Beds:		0	TITLE 18/19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED		
						License Exp Dt:		03/15/2018			
County	GONZALES			Reg Svcs:	TEAM ICF-IID			Region	08 - SAN ANTONIO		
Facility Information:		Facility ID:		007268		<u>Owner Information</u>					
SMILEY COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED							
282 FM 3234				33 CYPRESS BLVD							
SMILEY		TX	78159		ROUND ROCK		TX	,SUITE 100			
Phone	(830) 587-6253		Fax	(830) 587-6237				78665			
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PHONE:		(512) 336-0800	FAX: (512) 336-0812		
PRIVATE Beds:		0	TITLE 18/19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED		
						License Exp Dt:		03/15/2018			
County	GRAYSON			Reg Svcs:	IID TEAM			Region	03 - ARLINGTON		
Facility Information:		Facility ID:		003738		<u>Owner Information</u>					
ALTERNATE LIVING FACILITY I				MHMR SERVICES OF TEXOMA							
1101 S MIRICK AVE				315 W MCLAIN							
DENISON		TX	75020		SHERMAN		TX	,PO BOX 1087 (ZIP 75091)			
Phone	(903) 465-7383		Fax					75092			
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		10			
Cert Alzh Capacity:		0	TITLE19:		0	PHONE:		FAX:			
PRIVATE Beds:		0	TITLE 18/19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE GOVERNMENT BASED		
						License Exp Dt:					
County	GRAYSON			Reg Svcs:	IID TEAM			Region	03 - ARLINGTON		
Facility Information:		Facility ID:		003976		<u>Owner Information</u>					
ALTERNATE LIVING FACILITY III				MHMR SERVICES OF TEXOMA							
1100 WEST WALKER				315 W MCLAIN							
DENISON		TX	75020		SHERMAN		TX	,PO BOX 1087 (ZIP 75091)			
Phone	(903) 465-6434		Fax	(903) 786-2902				75092			
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PHONE:		FAX:			
PRIVATE Beds:		0	TITLE 18/19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE GOVERNMENT BASED		
						License Exp Dt:					
County	GRAYSON			Reg Svcs:	IID TEAM			Region	03 - ARLINGTON		
Facility Information:		Facility ID:		007314		<u>Owner Information</u>					
EDWARDS STREET HOUSE				EXCEPTIONALCARE INC							
603 EDWARDS ST				2402 W MORTON ST STE 140							
DENISON		TX	75020		DENISON		TX	75020			
Phone	(903) 463-6811		Fax	(903) 465-8799				75020			
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PHONE:		(903) 465-8766	FAX: (903) 465-8799		
PRIVATE Beds:		0	TITLE 18/19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED		
						License Exp Dt:		09/01/2017			

County	GRAYSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007638	<b>Owner Information</b>	
HYDE PARK HOUSE				EXCEPTIONALCARE INC	
1507 HYDE PARK AVE				2402 W MORTON ST STE 140	
DENISON		<b>TX</b>	75020	DENISON TX 75020	
<b>Phone</b>	(903) 463-6922	<b>Fax</b>	(903) 465-8799	<b>PHONE:</b>	(903) 465-8766
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/31/2017
County	GRAYSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007446	<b>Owner Information</b>	
LYNN STREET HOUSE				EXCEPTIONALCARE INC	
108 S LYNN ST				2402 W MORTON ST STE 140	
DENISON		<b>TX</b>	75020	DENISON TX 75020	
<b>Phone</b>	(903) 465-2655	<b>Fax</b>	(903) 465-8799	<b>PHONE:</b>	(903) 465-8766
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	08/04/2018
County	GRAYSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	003769	<b>Owner Information</b>	
MHMR SVCS OF TEXOMA ALTERNATE LIVING FACILITY II				MHMR SERVICES OF TEXOMA	
1217 DESVOIGNES RD				315 W MCLAIN ,PO BOX 1087 (ZIP 75091)	
DENISON		<b>TX</b>	75021	SHERMAN TX 75092	
<b>Phone</b>	(903) 463-5210	<b>Fax</b>		<b>PHONE:</b>	
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	10
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	GOVERNMENT BASED
				<b>License Exp Dt:</b>	
County	GRAYSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	101455	<b>Owner Information</b>	
EVERGREEN CARRIAGE ESTATES COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
2304 CARRIAGE ESTATES ROAD				10810 SANDEN DR	
SHERMAN		<b>TX</b>	75092	DALLAS TX 75238	
<b>Phone</b>	(903) 813-3278	<b>Fax</b>	(903) 893-6637	<b>PHONE:</b>	(972) 386-4834
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	07/03/2017
County	GRAYSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	101453	<b>Owner Information</b>	
EVERGREEN NORTHBROOK COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
1732 NORTHBROOK				10810 SANDEN DR	
SHERMAN		<b>TX</b>	75092	DALLAS TX 75238	
<b>Phone</b>	(903) 870-2113	<b>Fax</b>	(903) 893-6637	<b>PHONE:</b>	(972) 386-4834
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	07/02/2017
County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
<b>Facility Information:</b>		<b>Facility ID:</b>	007492	<b>Owner Information</b>	
MONTE CARLO COMMUNITY HOME				H M S INVESTMENTS INC	
12 MONTE CARLO				112 S WARD DR	
GLADEWATER		<b>TX</b>	75647	LONGVIEW TX 75604	
<b>Phone</b>	(903) 845-6662	<b>Fax</b>	(903) 295-7394	<b>PHONE:</b>	(903) 295-7391
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	12/22/2017

County	GREGG		Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER	
<b>Facility Information:</b>	<b>Facility ID:</b>	007572				<b>Owner Information</b>		
TENERY STREET COMMUNITY HOME						L M R HEALTHCARE SERVICES INC		
502 TENERY ST						112 S WARD		
GLADEWATER	<b>TX</b>	75647				LONGVIEW	<b>TX</b>	75604
<b>Phone</b>	(903) 845-4275	<b>Fax</b>	(903) 295-7394			<b>PHONE:</b>	(903) 295-7391	<b>FAX:</b> (903) 295-7394
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	12/03/2017	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	GREGG		Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER	
<b>Facility Information:</b>	<b>Facility ID:</b>	007224				<b>Owner Information</b>		
EVERGREEN DANVILLE ROAD COMMUNITY HOME						EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC		
1104 DANVILLE RD						10810 SANDEN DR		
KILGORE	<b>TX</b>	75662				DALLAS	<b>TX</b>	75238
<b>Phone</b>	(903) 984-9370	<b>Fax</b>	(903) 792-1861			<b>PHONE:</b>	(972) 386-4834	<b>FAX:</b>
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	08/14/2018	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	GREGG		Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER	
<b>Facility Information:</b>	<b>Facility ID:</b>	007431				<b>Owner Information</b>		
ROYAL DRIVE COMMUNITY HOME						S & H HOMES INC		
3009 ROYAL DR						112 S WARD DR		
KILGORE	<b>TX</b>	75662				LONGVIEW	<b>TX</b>	75604
<b>Phone</b>	(903) 984-0486	<b>Fax</b>	(903) 295-7394			<b>PHONE:</b>	(903) 295-7391	<b>FAX:</b> (903) 295-7394
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	07/10/2018	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	GREGG		Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER	
<b>Facility Information:</b>	<b>Facility ID:</b>	007541				<b>Owner Information</b>		
SCEYNE COMMUNITY HOME						R & K BARBER INC		
805 SCEYNE						112 S WARD		
KILGORE	<b>TX</b>	75662				LONGVIEW	<b>TX</b>	75604
<b>Phone</b>	(903) 983-3679	<b>Fax</b>	(903) 295-7394			<b>PHONE:</b>	(903) 295-7391	<b>FAX:</b> (903) 295-7394
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	06/11/2018	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	GREGG		Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER	
<b>Facility Information:</b>	<b>Facility ID:</b>	007608				<b>Owner Information</b>		
CHAD COMMUNITY HOME						D & S RESIDENTIAL SERVICES LP		
1202 CHAD						8911 N CAPITAL OF TX HWY		,BLDG 1 STE 1300
LONGVIEW	<b>TX</b>	75604				AUSTIN	<b>TX</b>	78759
<b>Phone</b>	(903) 759-5744	<b>Fax</b>				<b>PHONE:</b>	(512) 327-2325	<b>FAX:</b> (512) 327-5355
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	12/01/2017	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	GREGG		Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER	
<b>Facility Information:</b>	<b>Facility ID:</b>	003714				<b>Owner Information</b>		
CONCORD MANOR						SABINE VALLEY CENTER		
414 S CENTER						PO BOX 6800		
LONGVIEW	<b>TX</b>	75601				LONGVIEW	<b>TX</b>	75608
<b>Phone</b>	(903) 757-6040	<b>Fax</b>				<b>PHONE:</b>		<b>FAX:</b>
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	12	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> GOVERNMENT BASED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>		
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					

County	GREGG			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER				
Facility Information:		Facility ID:		007229		<u>Owner Information</u>						
EVERGREEN SPRING HILL COMMUNITY HOME						EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC						
225 SYBLE LN						10810 SANDEN DR						
LONGVIEW		TX	75605			DALLAS TX 75238						
Phone	(903) 297-4422	Fax	(903) 295-9993			PHONE: (972) 386-4834 FAX:						
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:		0	TITLE19:		0				License Exp Dt:	12/29/2016		
PRIVATE Beds:		0	TITLE 18/19:		0							
County	GREGG			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER				
Facility Information:		Facility ID:		007359		<u>Owner Information</u>						
EVERGREEN STONE TRAIL COMMUNITY HOME						EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC						
1205 STONE TRAIL						10810 SANDEN DR						
LONGVIEW		TX	75604			DALLAS TX 75238						
Phone	(903) 295-1277	Fax	(903) 295-9993			PHONE: (972) 386-4834 FAX:						
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:		0	TITLE19:		0				License Exp Dt:	01/23/2018		
PRIVATE Beds:		0	TITLE 18/19:		0							
County	GREGG			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER				
Facility Information:		Facility ID:		007261		<u>Owner Information</u>						
HARMONY HOUSE I I						HARMONY LIVING CENTERS INC						
1012 EAGLE HILL TRAIL						112 S WARD DR						
LONGVIEW		TX	75601			LONGVIEW TX 75604						
Phone	(903) 758-2439	Fax	(903) 295-7394			PHONE: (903) 295-7391 FAX: (903) 295-7394						
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:		0	TITLE19:		0				License Exp Dt:	02/27/2017		
PRIVATE Beds:		0	TITLE 18/19:		0							
County	GREGG			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER				
Facility Information:		Facility ID:		007255		<u>Owner Information</u>						
HONEYSUCKLE COMMUNITY HOME						D & S RESIDENTIAL SERVICES LP						
9 HONEYSUCKLE						8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300						
LONGVIEW		TX	75604			AUSTIN TX 78759						
Phone	(903) 297-3056	Fax				PHONE: (512) 327-2325 FAX: (512) 327-5355						
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:		0	TITLE19:		0				License Exp Dt:	12/01/2017		
PRIVATE Beds:		0	TITLE 18/19:		0							
County	GREGG			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER				
Facility Information:		Facility ID:		105457		<u>Owner Information</u>						
LOYD COURT 1						PACE OPPORTUNITY CENTERS INC						
312 LOYD COURT						1101 JAYCEE DR						
LONGVIEW		TX	75605			LONGVIEW TX 75604						
Phone	(903) 663-9493	Fax	(903) 238-9528			PHONE: (903) 238-9523 FAX: (903) 238-9528						
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:		0	TITLE19:		0				License Exp Dt:	03/19/2017		
PRIVATE Beds:		0	TITLE 18/19:		0							
County	GREGG			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER				
Facility Information:		Facility ID:		007587		<u>Owner Information</u>						
MARTIN COMMUNITY HOME						L M R HEALTHCARE SERVICES INC						
2809 CLENDENEN						112 S WARD						
LONGVIEW		TX	75601			LONGVIEW TX 75604						
Phone	(903) 758-6801	Fax	(903) 295-7394			PHONE: (903) 295-7391 FAX: (903) 295-7394						
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:		0	TITLE19:		0				License Exp Dt:	09/24/2017		
PRIVATE Beds:		0	TITLE 18/19:		0							

County	GREGG		Reg Svcs:		ICF/IID TEAM		Region		04 - TYLER		
Facility Information:		Facility ID:		007495		<u>Owner Information</u>					
MELTON HOUSE						PACE OPPORTUNITY CENTERS INC					
517 MELTON						1101 JAYCEE DR					
LONGVIEW		TX	75602			LONGVIEW		TX	75604		
Phone	(903) 753-4685		Fax	(903) 238-9528		PHONE:		(903) 238-9523		FAX:	(903) 238-9528
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID		SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		09/01/2016			
County	GREGG		Reg Svcs:		ICF/IID TEAM		Region		04 - TYLER		
Facility Information:		Facility ID:		003624		<u>Owner Information</u>					
PINETREE RESIDENCE						SABINE VALLEY CENTER					
303 EVERGREEN						PO BOX 6800					
LONGVIEW		TX	75604			LONGVIEW		TX	75608		
Phone	(903) 753-9804		Fax			PHONE:				FAX:	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID		SERVICE TYPE	GOVERNMENT BASED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:					
County	GREGG		Reg Svcs:		ICF/IID TEAM		Region		04 - TYLER		
Facility Information:		Facility ID:		007246		<u>Owner Information</u>					
PURDUE HOUSE						PACE OPPORTUNITY CENTERS INC					
1307 PURDUE DR						1101 JAYCEE DR					
LONGVIEW		TX	75601			LONGVIEW		TX	75604		
Phone	(903) 553-0637		Fax	(903) 238-9528		PHONE:		(903) 238-9523		FAX:	(903) 238-9528
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID		SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		09/01/2018			
County	GREGG		Reg Svcs:		ICF/IID TEAM		Region		04 - TYLER		
Facility Information:		Facility ID:		003623		<u>Owner Information</u>					
TERI LYN						SABINE VALLEY CENTER					
3704 TERI LYN						PO BOX 6800					
LONGVIEW		TX	75604			LONGVIEW		TX	75608		
Phone	(903) 753-9804		Fax			PHONE:				FAX:	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID		SERVICE TYPE	GOVERNMENT BASED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:					
County	GREGG		Reg Svcs:		ICF/IID TEAM		Region		04 - TYLER		
Facility Information:		Facility ID:		007297		<u>Owner Information</u>					
THELMA COMMUNITY HOME						D & S RESIDENTIAL SERVICES LP					
1009 THELMA						8911 N CAPITAL OF TX HWY		,BLDG 1 STE 1300			
LONGVIEW		TX	75604			AUSTIN		TX	78759		
Phone	(903) 759-3890		Fax	(512) 327-5355		PHONE:		(512) 327-2325		FAX:	(512) 327-5355
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID		SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		12/01/2017			
County	GREGG		Reg Svcs:		ICF/IID TEAM		Region		04 - TYLER		
Facility Information:		Facility ID:		003765		<u>Owner Information</u>					
TUPELO HOUSE						PACE OPPORTUNITY CENTERS INC					
511 TUPELO						1101 JAYCEE DR					
LONGVIEW		TX	75601			LONGVIEW		TX	75604		
Phone	(903) 238-9593		Fax	(903) 238-9528		PHONE:		(903) 238-9523		FAX:	(903) 238-9528
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		8			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID		SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		09/01/2018			

County	GUADALUPE			Reg Svcs:	TEAM ICF-IID			Region	08 - SAN ANTONIO		
Facility Information:		Facility ID:	003786		<u>Owner Information</u>						
CASA GUADALUPE I				UCG CENTRAL TEXAS HOLDINGS LLC							
957 KUNKEL ST				750 RUSK							
SEGUIN		TX	78155		NEW BRAUNFELS TX 78130						
Phone	(830) 379-8539		Fax	(214) 723-5331		PHONE: (830) 372-2920 FAX: (214) 723-5331					
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		8	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity:		0	TITLE19:		0	License Exp Dt: 09/01/2017					
PRIVATE Beds:		0	TITLE 18/19:		0						
County	GUADALUPE			Reg Svcs:	TEAM ICF-IID			Region	08 - SAN ANTONIO		
Facility Information:		Facility ID:	003830		<u>Owner Information</u>						
CASA GUADALUPE II				UCG CENTRAL TEXAS HOLDINGS LLC							
936 ZUNKER				750 RUSK							
SEGUIN		TX	78155		NEW BRAUNFELS TX 78130						
Phone	(830) 372-2920		Fax	(214) 723-5331		PHONE: (830) 372-2920 FAX: (214) 723-5331					
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		8	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity:		0	TITLE19:		0	License Exp Dt: 09/01/2017					
PRIVATE Beds:		0	TITLE 18/19:		0						
County	GUADALUPE			Reg Svcs:	TEAM ICF-IID			Region	08 - SAN ANTONIO		
Facility Information:		Facility ID:	007394		<u>Owner Information</u>						
DOVE LANE				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS							
1427 DOVE LN				9901 LINN STATION RD							
SEGUIN		TX	78155		LOUISVILLE KY 40223						
Phone	(830) 303-6830		Fax			PHONE: (502) 394-2100 FAX: (502) 394-2285					
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity:		0	TITLE19:		0	License Exp Dt: 09/01/2018					
PRIVATE Beds:		0	TITLE 18/19:		0						
County	GUADALUPE			Reg Svcs:	TEAM ICF-IID			Region	08 - SAN ANTONIO		
Facility Information:		Facility ID:	003943		<u>Owner Information</u>						
MOSAIC				MOSAIC							
1622 WILLOW LN				428 ST ANDREWS DR							
SEGUIN		TX	78155		ALLEN TX 75002						
Phone	(210) 967-0566		Fax	(210) 967-6232		PHONE: (469) 675-1561 FAX: (469) 675-1562					
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity:		0	TITLE19:		0	License Exp Dt: 01/01/2017					
PRIVATE Beds:		0	TITLE 18/19:		0						
County	GUADALUPE			Reg Svcs:	TEAM ICF-IID			Region	08 - SAN ANTONIO		
Facility Information:		Facility ID:	003604		<u>Owner Information</u>						
MOSAIC				MOSAIC							
109 BURR OAK				428 ST ANDREWS DR							
SEGUIN		TX	78155		ALLEN TX 75002						
Phone	(830) 372-2525		Fax	(830) 303-3075		PHONE: (469) 675-1561 FAX: (469) 675-1562					
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity:		0	TITLE19:		0	License Exp Dt: 01/01/2017					
PRIVATE Beds:		0	TITLE 18/19:		0						
County	GUADALUPE			Reg Svcs:	TEAM ICF-IID			Region	08 - SAN ANTONIO		
Facility Information:		Facility ID:	003999		<u>Owner Information</u>						
MOSAIC				MOSAIC							
974 E CEDAR				428 ST ANDREWS DR							
SEGUIN		TX	78155		ALLEN TX 75002						
Phone	(210) 967-0566		Fax	(210) 967-6232		PHONE: (469) 675-1561 FAX: (469) 675-1562					
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity:		0	TITLE19:		0	License Exp Dt: 01/01/2017					
PRIVATE Beds:		0	TITLE 18/19:		0						

County	GUADALUPE			Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO		
Facility Information:		Facility ID:	003627		<u>Owner Information</u>					
RIVER OAK				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS						
1005 RIVER OAK DR				9901 LINN STATION RD						
SEGUIN		TX	78155		LOUISVILLE		KY	40223		
Phone	(830) 303-6835		Fax			PHONE:	(502) 394-2100		FAX:	(502) 394-2285
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		05/20/2017		
County	HALE			Reg Svcs:	HIGH PLAINS ICF/MR		Region	01 - LUBBOCK		
Facility Information:		Facility ID:	003939		<u>Owner Information</u>					
RILEY ARMSTRONG RESIDENTIAL FACILITY				CENTRAL PLAINS CENTER						
2911 W 21ST ST				2700 YONKERS ST						
PLAINVIEW		TX	79072		PLAINVIEW		TX	79072		
Phone	(806) 291-4455		Fax			PHONE:			FAX:	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	GOVERNMENT BASED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:				
County	HARDIN			Reg Svcs:	REGION 5 ICF/IID		Region	05 - BEAUMONT		
Facility Information:		Facility ID:	003809		<u>Owner Information</u>					
FRIES HOUSE				ST GILES - BAYTOWN INC						
190 E AVE J				2203 KILGORE ROAD						
SILSBEE		TX	77656		BAYTOWN		TX	77520		
Phone	(409) 651-9185		Fax	(214) 723-5331		PHONE:	(281) 837-1942		FAX:	(281) 427-0586
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		8		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		09/01/2017		
County	HARDIN			Reg Svcs:	REGION 5 ICF/IID		Region	05 - BEAUMONT		
Facility Information:		Facility ID:	007554		<u>Owner Information</u>					
ROOSEVELT COMMUNITY HOME				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC						
1020 ROOSEVELT DRIVE				4115 GALVESTON ROAD						
SILSBEE		TX	77656		HOUSTON		TX	77017		
Phone	(409) 832-4112		Fax	(409) 832-6974		PHONE:	(713) 475-2228		FAX:	(713) 472-2212
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/01/2019		
County	HARDIN			Reg Svcs:	REGION 5 ICF/IID		Region	05 - BEAUMONT		
Facility Information:		Facility ID:	007413		<u>Owner Information</u>					
WOODLEA COMMUNITY HOME				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC						
101 OGLESBEE RD				4115 GALVESTON ROAD						
SILSBEE		TX	77656		HOUSTON		TX	77017		
Phone	(409) 832-4112		Fax	(409) 832-6974		PHONE:	(713) 475-2228		FAX:	(713) 472-2212
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/01/2019		
County	HARRIS			Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON		
Facility Information:		Facility ID:	007570		<u>Owner Information</u>					
BURNING TREE LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC						
4902 BURNING TREE				4115 GALVESTON RD						
BAYTOWN		TX	77521		HOUSTON		TX	77017		
Phone	(713) 475-2220		Fax	(713) 475-2332		PHONE:	(713) 475-2228		FAX:	(713) 475-2212
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/01/2017		

County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON	
Facility Information:			Facility ID:		003605		Owner Information			
KILGORE HOUSE							ST GILES - BAYTOWN INC			
2203 KILGORE RD							2203 KILGORE ROAD			
BAYTOWN			TX		77520		TX		77520	
Phone	(281) 837-1942		Fax	(281) 427-0586				PHONE:	(281) 837-1942	
TOTAL Lic Capacity:			0		TITLE 18:		0		ICF/IID: 6	
Cert Alzh Capacity:			0		TITLE19:		0		PROGRAM TYPE: ICF/IID	
PRIVATE Beds:			0		TITLE 18/19:		0		License Exp Dt: 09/01/2017	
COUNTY			HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region 06 - HOUSTON	
Facility Information:			Facility ID:		007411		Owner Information			
MAPLEWOOD LIVING CENTER							DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC			
706 MAPLEWOOD ST							4115 GALVESTON RD			
BAYTOWN			TX		77520		TX		77017	
Phone	(713) 475-2228		Fax	(713) 475-2212				PHONE:	(713) 475-2228	
TOTAL Lic Capacity:			0		TITLE 18:		0		ICF/IID: 6	
Cert Alzh Capacity:			0		TITLE19:		0		PROGRAM TYPE: ICF/IID	
PRIVATE Beds:			0		TITLE 18/19:		0		License Exp Dt: 01/01/2019	
COUNTY			HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region 06 - HOUSTON	
Facility Information:			Facility ID:		003671		Owner Information			
MCFARLAND HOUSE							ST GILES - BAYTOWN INC			
1706 MCFARLAND							2203 KILGORE ROAD			
BAYTOWN			TX		77520		TX		77520	
Phone	(281) 837-8686		Fax					PHONE:	(281) 837-1942	
TOTAL Lic Capacity:			0		TITLE 18:		0		ICF/IID: 6	
Cert Alzh Capacity:			0		TITLE19:		0		PROGRAM TYPE: ICF/IID	
PRIVATE Beds:			0		TITLE 18/19:		0		License Exp Dt: 09/01/2017	
COUNTY			HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region 06 - HOUSTON	
Facility Information:			Facility ID:		007381		Owner Information			
NORTH SHEPHERD HOUSE							ST GILES - BAYTOWN INC			
1112 N SHEPHERD							2203 KILGORE ROAD			
BAYTOWN			TX		77520		TX		77520	
Phone	(281) 837-6238		Fax	(713) 271-8585				PHONE:	(281) 837-1942	
TOTAL Lic Capacity:			0		TITLE 18:		0		ICF/IID: 6	
Cert Alzh Capacity:			0		TITLE19:		0		PROGRAM TYPE: ICF/IID	
PRIVATE Beds:			0		TITLE 18/19:		0		License Exp Dt: 09/01/2017	
COUNTY			HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region 06 - HOUSTON	
Facility Information:			Facility ID:		007565		Owner Information			
OLIVE LIVING CENTER							DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC			
2301 OLIVE CIRCLE							4115 GALVESTON RD			
BAYTOWN			TX		77522		TX		77017	
Phone	(713) 475-2220		Fax	(713) 472-2332				PHONE:	(713) 475-2228	
TOTAL Lic Capacity:			0		TITLE 18:		0		ICF/IID: 6	
Cert Alzh Capacity:			0		TITLE19:		0		PROGRAM TYPE: ICF/IID	
PRIVATE Beds:			0		TITLE 18/19:		0		License Exp Dt: 01/01/2017	
COUNTY			HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region 06 - HOUSTON	
Facility Information:			Facility ID:		007560		Owner Information			
CLASSIC GROUP HOME							SHIRLEY SHAW			
1454 SOMERCOTES LANE							18511 NORTH ROARING RIVER COURT			
CHANNELVIEW			TX		77530		TX		77346	
Phone	(281) 452-4661		Fax	(281) 452-4639				PHONE:	(713) 979-6193	
TOTAL Lic Capacity:			0		TITLE 18:		0		ICF/IID: 6	
Cert Alzh Capacity:			0		TITLE19:		0		PROGRAM TYPE: ICF/IID	
PRIVATE Beds:			0		TITLE 18/19:		0		License Exp Dt: 09/23/2017	



County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003608	<b>Owner Information</b>			
CYPRESS COTTAGE		REACH UNLIMITED INC			
11914 MUELLER CEMETERY RD		12777 JONES RD			
CYPRESS	TX 77429	, #103			
<b>Phone</b> (281) 373-9404	<b>Fax</b> (281) 373-3820	HOUSTON TX 77070			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (281) 469-8058	<b>FAX:</b> (281) 469-5030	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 06/14/2018		
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003654	<b>Owner Information</b>			
CYPRESS GROUP HOME		BETHESDA LUTHERAN COMMUNITIES INC			
18211 K Z RD		18937 K Z RD			
CYPRESS	TX 77433	CYPRESS TX 77433			
<b>Phone</b> (281) 516-4000	<b>Fax</b> (281) 351-5897	<b>PHONE:</b> (281) 516-4000 <b>FAX:</b> (281) 351-5897			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>License Exp Dt:</b> 03/20/2018		
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0				
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003655	<b>Owner Information</b>			
GOOD SAMARITAN GROUP HOME		BETHESDA LUTHERAN COMMUNITIES INC			
18937 K Z RD		18937 K Z RD			
CYPRESS	TX 77433	CYPRESS TX 77433			
<b>Phone</b> (281) 516-4000	<b>Fax</b> (281) 351-5897	<b>PHONE:</b> (281) 516-4000 <b>FAX:</b> (281) 351-5897			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>License Exp Dt:</b> 03/22/2018		
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0				
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003615	<b>Owner Information</b>			
KINGS COURT GROUP HOME		BETHESDA LUTHERAN COMMUNITIES INC			
17626 KINGS CT		18937 K Z RD			
CYPRESS	TX 77429	CYPRESS TX 77433			
<b>Phone</b> (281) 576-4000	<b>Fax</b> (281) 351-5897	<b>PHONE:</b> (281) 516-4000 <b>FAX:</b> (281) 351-5897			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>License Exp Dt:</b> 07/14/2018		
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0				
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003619	<b>Owner Information</b>			
MAVERICK VALLEY GROUP HOME		BETHESDA LUTHERAN COMMUNITIES INC			
14802 MAVERICK VALLEY LANE		18937 K Z RD			
CYPRESS	TX 77429	CYPRESS TX 77433			
<b>Phone</b> (281) 758-4865	<b>Fax</b> (281) 351-5897	<b>PHONE:</b> (281) 516-4000 <b>FAX:</b> (281) 351-5897			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>License Exp Dt:</b> 07/31/2018		
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0				
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>	<b>Facility ID:</b> 010197	<b>Owner Information</b>			
MUELLER HOUSE		REACH UNLIMITED INC			
11910 MUELLER CEMETERY RD		12777 JONES RD			
CYPRESS	TX 77429	, #103			
<b>Phone</b> (281) 373-9406	<b>Fax</b> (281) 373-4074	HOUSTON TX 77070			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 9	<b>PHONE:</b> (281) 469-8058	<b>FAX:</b> (281) 469-5030	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 09/24/2017		

County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON								
Facility Information:		Facility ID:		003909		<u>Owner Information</u>											
NORTHWEST VILLA COMMUNITY HOME						EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP											
11910 MEADOWVIEW DR						9901 LINN STATION ROAD											
CYPRESS		TX		77429		LOUISVILLE		KY		40223-3808							
Phone	(281) 370-2103		Fax				PHONE:		(502) 394-2100		FAX: (502) 394-2285						
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6		PROGRAM TYPE: ICF/IID		SERVICE TYPE		PRIVATELY OWNED	
Cert Alzh Capacity:		0		TITLE19:		0		License Exp Dt:		01/01/2019							
PRIVATE Beds:		0		TITLE 18/19:		0											
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON								
Facility Information:		Facility ID:		007283		<u>Owner Information</u>											
GARDEN LIVING CENTER						DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC											
913 E X STREET						4115 GALVESTON RD											
DEER PARK		TX		77536		HOUSTON		TX		77017							
Phone	(713) 475-2228		Fax		(713) 475-2212		PHONE:		(713) 475-2228		FAX: (713) 475-2212						
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6		PROGRAM TYPE: ICF/IID		SERVICE TYPE		PRIVATELY OWNED	
Cert Alzh Capacity:		0		TITLE19:		0		License Exp Dt:		01/01/2019							
PRIVATE Beds:		0		TITLE 18/19:		0											
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON								
Facility Information:		Facility ID:		007424		<u>Owner Information</u>											
HENDERSON LIVING CENTER						DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC											
2601 HENDERSON LN						4115 GALVESTON RD											
DEER PARK		TX		77536		HOUSTON		TX		77017							
Phone	(713) 475-2220		Fax		(713) 472-2332		PHONE:		(713) 475-2228		FAX: (713) 475-2212						
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6		PROGRAM TYPE: ICF/IID		SERVICE TYPE		PRIVATELY OWNED	
Cert Alzh Capacity:		0		TITLE19:		0		License Exp Dt:		01/01/2017							
PRIVATE Beds:		0		TITLE 18/19:		0											
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON								
Facility Information:		Facility ID:		007284		<u>Owner Information</u>											
WINDSOR LIVING CENTER						DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC											
3602 WINDSOR LN						4115 GALVESTON RD											
DEER PARK		TX		77536		HOUSTON		TX		77017							
Phone	(713) 475-2220		Fax		(713) 472-2332		PHONE:		(713) 475-2228		FAX: (713) 475-2212						
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6		PROGRAM TYPE: ICF/IID		SERVICE TYPE		PRIVATELY OWNED	
Cert Alzh Capacity:		0		TITLE19:		0		License Exp Dt:		01/01/2017							
PRIVATE Beds:		0		TITLE 18/19:		0											
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON								
Facility Information:		Facility ID:		007661		<u>Owner Information</u>											
1801 BRANARD						ST GILES - BAYTOWN INC											
1801 BRANARD ST						2203 KILGORE ROAD											
HOUSTON		TX		77098		BAYTOWN		TX		77520							
Phone	(713) 524-7473		Fax		(713) 524-4153		PHONE:		(281) 837-1942		FAX: (281) 427-0586						
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		13		PROGRAM TYPE: ICF/IID		SERVICE TYPE		PRIVATELY OWNED	
Cert Alzh Capacity:		0		TITLE19:		0		License Exp Dt:		09/01/2017							
PRIVATE Beds:		0		TITLE 18/19:		0											
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON								
Facility Information:		Facility ID:		007660		<u>Owner Information</u>											
616 WEST BELL						ST GILES - BAYTOWN INC											
616 W BELL ST						2203 KILGORE ROAD											
HOUSTON		TX		77019		BAYTOWN		TX		77520							
Phone	(713) 524-5392		Fax		(713) 524-3821		PHONE:		(281) 837-1942		FAX: (281) 427-0586						
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		13		PROGRAM TYPE: ICF/IID		SERVICE TYPE		PRIVATELY OWNED	
Cert Alzh Capacity:		0		TITLE19:		0		License Exp Dt:		09/01/2017							
PRIVATE Beds:		0		TITLE 18/19:		0											

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>	<b>Facility ID:</b> 007548	<b>Owner Information</b>			
APRIL WIND HOUSE		COMMUNITY HEALTHCARE SERVICES INC			
3015 APRIL WIND HOUSTON	<b>TX</b> 77014	3015 APRIL WIND DR			
<b>Phone</b> (281) 893-9090	<b>Fax</b> (281) 893-0707	HOUSTON TX 77014			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (281) 893-9090	<b>FAX:</b> (281) 893-0707	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 12/01/2017		
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>	<b>Facility ID:</b> 102827	<b>Owner Information</b>			
AVONDALE HOUSE		AVONDALE HOUSE			
5614 BENNING HOUSTON	<b>TX</b> 77096	3737 OMEARA DR			
<b>Phone</b> (713) 726-1239	<b>Fax</b>	HOUSTON TX 77025			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (713) 993-9589	<b>FAX:</b> (713) 993-0751	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 11/29/2018		
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>	<b>Facility ID:</b> 010183	<b>Owner Information</b>			
AVONDALE HOUSE III		AVONDALE HOUSE			
4826 MCDERMED HOUSTON	<b>TX</b> 77035	3737 OMEARA DR			
<b>Phone</b> (713) 993-9544	<b>Fax</b> (713) 993-0751	HOUSTON TX 77025			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (713) 993-9589	<b>FAX:</b> (713) 993-0751	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 02/07/2018		
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>	<b>Facility ID:</b> 010182	<b>Owner Information</b>			
AVONDALE HOUSE II		AVONDALE HOUSE			
8515 BLUEGATE HOUSTON	<b>TX</b> 77025	3737 OMEARA DR			
<b>Phone</b> (713) 993-9544	<b>Fax</b> (713) 993-0751	HOUSTON TX 77025			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (713) 993-9589	<b>FAX:</b> (713) 993-0751	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 10/08/2017		
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003914	<b>Owner Information</b>			
BEARCREEK		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
5006 STANHOPE HOUSTON	<b>TX</b> 77064	9901 LINN STATION ROAD			
<b>Phone</b> (281) 463-2227	<b>Fax</b>	LOUISVILLE KY 40223-3808			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (512) 498-2700	<b>FAX:</b> (512) 498-2777	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 05/02/2018		
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003859	<b>Owner Information</b>			
BEECHNUT HOUSE		VITA-LIVING INC			
8114 BEECHNUT HOUSTON	<b>TX</b> 77036	3300 S GESSNER ,STE 150			
<b>Phone</b> (713) 779-2684	<b>Fax</b> (713) 981-4512	HOUSTON TX 77063			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (713) 271-5795	<b>FAX:</b> (713) 981-4512	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 03/26/2018		

County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON		
Facility Information:		Facility ID:		007486		<u>Owner Information</u>					
BOSWORTH LIVING CENTER						DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC					
5126 BOSWORTH ST						4115 GALVESTON RD					
HOUSTON		TX		77017		HOUSTON		TX		77017	
Phone	(713) 475-2220		Fax	(713) 475-4332		PHONE:		(713) 475-2228		FAX:	(713) 475-2212
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6	
Cert Alzh Capacity:		0		TITLE19:		0		PROGRAM TYPE:		ICF/IID	
PRIVATE Beds:		0		TITLE 18/19:		0		License Exp Dt:		01/01/2017	
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON		
Facility Information:		Facility ID:		003915		<u>Owner Information</u>					
BRIAR GROVE PARK						EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST					
10038 BRIAR FOREST DR						9901 LINN STATION ROAD					
HOUSTON		TX		77042		LOUISVILLE		KY		40223-3808	
Phone	(713) 782-5454		Fax			PHONE:		(512) 498-2700		FAX:	(512) 498-2777
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6	
Cert Alzh Capacity:		0		TITLE19:		0		PROGRAM TYPE:		ICF/IID	
PRIVATE Beds:		0		TITLE 18/19:		0		License Exp Dt:		03/01/2018	
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON		
Facility Information:		Facility ID:		003895		<u>Owner Information</u>					
CAMPBELL HOUSE						VITA-LIVING INC					
1825 CAMPBELL						3300 S GESSNER					
HOUSTON		TX		77080		HOUSTON		TX		,STE 150	
Phone	(713) 827-1159		Fax	(713) 827-1159		PHONE:		(713) 271-5795		FAX:	(713) 981-4512
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6	
Cert Alzh Capacity:		0		TITLE19:		0		PROGRAM TYPE:		ICF/IID	
PRIVATE Beds:		0		TITLE 18/19:		0		License Exp Dt:		08/21/2018	
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON		
Facility Information:		Facility ID:		003684		<u>Owner Information</u>					
CAREW HOUSE						VITA-LIVING INC					
7410 CAREW STREET						3300 S GESSNER					
HOUSTON		TX		77074		HOUSTON		TX		,STE 150	
Phone	(713) 271-9851		Fax	(281) 492-8331		PHONE:		(713) 271-5795		FAX:	(713) 981-4512
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6	
Cert Alzh Capacity:		0		TITLE19:		0		PROGRAM TYPE:		ICF/IID	
PRIVATE Beds:		0		TITLE 18/19:		0		License Exp Dt:		02/23/2018	
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON		
Facility Information:		Facility ID:		003930		<u>Owner Information</u>					
COPPERFIELD						EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST					
15311 FOREST TRAILS						9901 LINN STATION ROAD					
HOUSTON		TX		77095		LOUISVILLE		KY		40223-3808	
Phone	(281) 855-0857		Fax			PHONE:		(512) 498-2700		FAX:	(512) 498-2777
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6	
Cert Alzh Capacity:		0		TITLE19:		0		PROGRAM TYPE:		ICF/IID	
PRIVATE Beds:		0		TITLE 18/19:		0		License Exp Dt:		03/01/2018	
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON		
Facility Information:		Facility ID:		003643		<u>Owner Information</u>					
CUTTEN GREEN						REACH UNLIMITED INC					
11519 COLONIAL TRAIL						12777 JONES RD					
HOUSTON		TX		77066		HOUSTON		TX		,#103	
Phone	(281) 537-1679		Fax	(281) 580-2951		PHONE:		(281) 469-8058		FAX:	(281) 469-5030
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6	
Cert Alzh Capacity:		0		TITLE19:		0		PROGRAM TYPE:		ICF/IID	
PRIVATE Beds:		0		TITLE 18/19:		0		License Exp Dt:		02/01/2018	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003960	<b>Owner Information</b>			
DEERFIELD		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
18006 LONGCLIFFE		9901 LINN STATION ROAD			
HOUSTON	TX 77084	LOUISVILLE KY 40223-3808			
<b>Phone</b> (281) 550-8604	<b>Fax</b>	<b>PHONE:</b> (512) 498-2700	<b>FAX:</b> (512) 498-2777		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 03/01/2016			
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>	<b>Facility ID:</b> 007616	<b>Owner Information</b>			
DESTINY HOUSE		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
8002 FAWN TERRACE		9901 LINN STATION ROAD			
HOUSTON	TX 77071	LOUISVILLE KY 40223-3808			
<b>Phone</b> (713) 283-0711	<b>Fax</b>	<b>PHONE:</b> (512) 498-2700	<b>FAX:</b> (512) 498-2777		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 07/31/2018			
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003910	<b>Owner Information</b>			
DONSKY HOUSE		MHMR AUTHORITY OF HARRIS COUNTY			
11511 BOB WHITE ST		2850 FANNIN			
HOUSTON	TX 77035	HOUSTON TX 77265-5381			
<b>Phone</b> (713) 728-4956	<b>Fax</b>	<b>PHONE:</b> (713) 750-5600	<b>FAX:</b>		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	GOVERNMENT BASED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b>			
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003980	<b>Owner Information</b>			
EBONY COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
2519 LOWER VALLEY DRIVE		9901 LINN STATION ROAD			
HOUSTON	TX 77067-1901	LOUISVILLE KY 40223-3808			
<b>Phone</b> (281) 586-7067	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100	<b>FAX:</b> (502) 394-2285		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 01/01/2019			
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003885	<b>Owner Information</b>			
FAITH HOUSE		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
7418 ANTOINE		9901 LINN STATION ROAD			
HOUSTON	TX 77088	LOUISVILLE KY 40223-3808			
<b>Phone</b> (281) 999-5066	<b>Fax</b>	<b>PHONE:</b> (512) 498-2700	<b>FAX:</b> (512) 498-2777		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 07/31/2018			
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>	<b>Facility ID:</b> 007585	<b>Owner Information</b>			
FROSTVIEW HOUSE II		D & D CARE HOMES INC			
15331 E ANTONE		820 PARK TWO DRIVE			
HOUSTON	TX 77071	SUGARLAND TX 77478			
<b>Phone</b> (713) 728-4148	<b>Fax</b> (713) 271-8585	<b>PHONE:</b> (713) 728-4149	<b>FAX:</b> (713) 271-8585		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 09/01/2017			

County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON			
Facility Information:		Facility ID:	007437		<u>Owner Information</u>					
GREAT HOME CARE INC					GREAT HOME CARE INC					
12502 LIMA DRIVE					12502 LIMA DRIVE					
HOUSTON		TX	77099		HOUSTON		TX	77099		
Phone	(281) 530-8710	Fax	(281) 568-5828		PHONE:		(281) 568-3532	FAX:	(281) 568-5828	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		04/10/2018		
County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON			
Facility Information:		Facility ID:	003913		<u>Owner Information</u>					
HEARTHSTONE					EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST					
7206 BENWICH CIRCLE					9901 LINN STATION ROAD					
HOUSTON		TX	77095		LOUISVILLE		KY	40223-3808		
Phone	(281) 463-1034	Fax			PHONE:		(512) 498-2700	FAX:	(512) 498-2777	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		03/01/2018		
County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON			
Facility Information:		Facility ID:	003978		<u>Owner Information</u>					
HOPE HOUSE					EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST					
9107 SPELLMAN					9901 LINN STATION ROAD					
HOUSTON		TX	77031		LOUISVILLE		KY	40223-3808		
Phone	(713) 988-1461	Fax			PHONE:		(512) 498-2700	FAX:	(512) 498-2777	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		07/31/2018		
County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON			
Facility Information:		Facility ID:	007317		<u>Owner Information</u>					
HOUSTON IN A VISION					HOUSTON IN-A-VISION INC					
6442 GLADEWELL					3203 CYPRESS POINT DRIVE					
HOUSTON		TX	77072		MISSOURI CITY		TX	77459		
Phone	(281) 495-7509	Fax	(713) 495-7509		PHONE:		(281) 416-0607	FAX:	(713) 271-8585	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		09/01/2017		
County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON			
Facility Information:		Facility ID:	003907		<u>Owner Information</u>					
JERSEY VILLAGE					EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST					
16130 ACAPULCO					9901 LINN STATION ROAD					
HOUSTON		TX	77040		LOUISVILLE		KY	40223-3808		
Phone	(713) 896-8355	Fax			PHONE:		(512) 498-2700	FAX:	(512) 498-2777	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		03/01/2018		
County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON			
Facility Information:		Facility ID:	007597		<u>Owner Information</u>					
K AND K LIVING CENTER 2					K & K LIVING CENTER INC					
16602 GAELDOM LN					PO BOX 842679					
HOUSTON		TX	77084		HOUSTON		TX	77284		
Phone	(281) 859-9474	Fax	(281) 859-8037		PHONE:		(281) 859-9474	FAX:	(281) 859-8037	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		04/07/2018		

County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON		
Facility Information:		Facility ID:		007387		<u>Owner Information</u>					
K AND K LIVING CENTER INC						K & K LIVING CENTER INC					
16802 JUDY LEIGH DR						PO BOX 842679					
HOUSTON		TX	77084			HOUSTON		TX	77284		
Phone	(281) 859-9474		Fax	(281) 859-8037		PHONE:		(281) 859-9474		FAX:	(281) 859-8037
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID		SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		03/30/2018			
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON		
Facility Information:		Facility ID:		003746		<u>Owner Information</u>					
LAKELAND						EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST					
5706 PINEWILDE						9901 LINN STATION ROAD					
HOUSTON		TX	77066			LOUISVILLE		KY	40223-3808		
Phone	(281) 580-4103		Fax			PHONE:		(512) 498-2700		FAX:	(512) 498-2777
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID		SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		10/09/2017			
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON		
Facility Information:		Facility ID:		003729		<u>Owner Information</u>					
MAPLEWOOD SOUTH						EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST					
8111 BURNING HILLS						9901 LINN STATION ROAD					
HOUSTON		TX	77071			LOUISVILLE		KY	40223-3808		
Phone	(713) 271-2534		Fax			PHONE:		(512) 498-2700		FAX:	(512) 498-2777
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID		SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		10/10/2018			
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON		
Facility Information:		Facility ID:		003897		<u>Owner Information</u>					
MEMORIAL COMMUNITY HOME						EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP					
17115 CAMBERWELL GREEN LANE						9901 LINN STATION ROAD					
HOUSTON		TX	77070-1817			LOUISVILLE		KY	40223-3808		
Phone	(281) 370-5702		Fax			PHONE:		(502) 394-2100		FAX:	(502) 394-2285
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID		SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/01/2019			
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON		
Facility Information:		Facility ID:		007239		<u>Owner Information</u>					
MERIDIAN LIVING CENTER						MERIDIAN LIVING CENTER INC					
7231 AUGUSTINE DR						#4 MOCKINGBIRD					
HOUSTON		TX	77036			HOUSTON		TX	77074		
Phone	(713) 272-9707		Fax	(713) 778-9313		PHONE:		(713) 778-9300		FAX:	(713) 778-9313
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID		SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		02/15/2018			
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON		
Facility Information:		Facility ID:		007428		<u>Owner Information</u>					
MERIDIAN LIVING CENTER I I						MERIDIAN LIVING CENTER INC					
10610 ODYSSEY CT						#4 MOCKINGBIRD					
HOUSTON		TX	77099			HOUSTON		TX	77074		
Phone	(281) 568-1338		Fax	(713) 778-9300		PHONE:		(713) 778-9300		FAX:	(713) 778-9313
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID		SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		07/01/2018			

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007595	<b>Owner Information</b>	
PACE OPPORTUNITY CENTERS INC.				PACE OPPORTUNITY CENTERS INC	
929 OAK STREET				1101 JAYCEE DR	
HOUSTON				LONGVIEW TX 75604	
<b>Phone</b>	(903) 238-9523	<b>Fax</b>	(903) 238-9528	<b>PHONE:</b>	(903) 238-9523
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	06/01/2017
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007275	<b>Owner Information</b>	
PEBBLESHIRE HOUSE				S&G COMMUNITY LIVING CENTER INC	
7865 PECAN VILLAS				7865 PECAN VILLAS	
HOUSTON				HOUSTON TX 77061	
<b>Phone</b>	(713) 640-1044	<b>Fax</b>	(281) 334-7850	<b>PHONE:</b>	(713) 598-1471
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	05/01/2018
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007296	<b>Owner Information</b>	
PERIWINKLE HOUSE				JOHN M LUGAY	
1638 PERIWINKLE ST				17126 WUNDER HILL DR	
HOUSTON				SPRING TX 77379	
<b>Phone</b>	(281) 448-9005	<b>Fax</b>	(281) 379-6068	<b>PHONE:</b>	(281) 379-4833
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	08/09/2018
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007384	<b>Owner Information</b>	
RAVENHEAD LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC	
314 RAVENHEAD ST				4115 GALVESTON RD	
HOUSTON				HOUSTON TX 77017	
<b>Phone</b>	(713) 475-2220	<b>Fax</b>	(713) 472-2332	<b>PHONE:</b>	(713) 475-2228
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2017
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>		<b>Facility ID:</b>	003828	<b>Owner Information</b>	
ROSE HOUSE				EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST	
12711 SHANNON HILLS				9901 LINN STATION ROAD	
HOUSTON				LOUISVILLE KY 40223-3808	
<b>Phone</b>	(281) 564-4256	<b>Fax</b>		<b>PHONE:</b>	(512) 498-2700
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	07/31/2018
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
<b>Facility Information:</b>		<b>Facility ID:</b>	003888	<b>Owner Information</b>	
SABLE LANE COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
13403 SABLE LN				9901 LINN STATION ROAD	
HOUSTON				LOUISVILLE KY 40223-3808	
<b>Phone</b>	(281) 444-4120	<b>Fax</b>		<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2017



County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID:	010200	<u>Owner Information</u>		
SHADY VILLA PLACE			REACH UNLIMITED INC		
7715 SHADY VILLA LN			12777 JONES RD		
HOUSTON	TX	77055		#103	
Phone	(713) 956-7860	Fax	(713) 956-4835	HOUSTON	TX 77070
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(281) 469-8058 FAX: (281) 469-5030
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/27/2017
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID:	003971	<u>Owner Information</u>		
SPRING SHADOWS			EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST		
2803 QUINCANNON			9901 LINN STATION ROAD		
HOUSTON	TX	77043			
Phone	(713) 690-3127	Fax		LOUISVILLE	KY 40223-3808
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(512) 498-2700 FAX: (512) 498-2777
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	02/14/2018
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID:	007472	<u>Owner Information</u>		
UCG - ALBURY HOUSE			FROSTVIEW LANE LLC		
11019 ALBURY			820 PARK TWO		
HOUSTON	TX	77096			
Phone	(713) 774-3656	Fax	(281) 568-8125	SUGARLAND	TX 77478
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(713) 835-0527 FAX: (713) 271-8585
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/01/2017
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID:	007263	<u>Owner Information</u>		
UCG - HUMMINGBIRD HOUSE			FROSTVIEW LANE LLC		
9726 S. HANWORTH DR.			820 PARK TWO		
HOUSTON	TX	77031			
Phone	(713) 271-7777	Fax	(713) 271-8585	SUGARLAND	TX 77478
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(713) 835-0527 FAX: (713) 271-8585
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/01/2017
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID:	003656	<u>Owner Information</u>		
UCG - SOUTHMEADOW HOUSE			FROSTVIEW LANE LLC		
8510 SOUTHMEADOW			820 PARK TWO		
HOUSTON	TX	77071			
Phone	(713) 776-0805	Fax	(713) 271-8585	SUGARLAND	TX 77478
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(713) 835-0527 FAX: (713) 271-8585
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/01/2017
County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID:	007801	<u>Owner Information</u>		
UCG NIGHTINGALE I			FROSTVIEW LANE LLC		
13927 MAGNUS LANE			820 PARK TWO		
HOUSTON	TX	77083			
Phone	(713) 981-1571	Fax	(713) 271-8585	SUGARLAND	TX 77478
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(713) 835-0527 FAX: (713) 271-8585
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/01/2017

County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON	
Facility Information:			Facility ID:		007806		<u>Owner Information</u>			
UCG NIGHTINGALE I I							FROSTVIEW LANE LLC			
7327 BEECHNUT ST							820 PARK TWO			
HOUSTON			TX		77074		SUGARLAND TX 77478			
Phone	(713) 541-2667		Fax	(713) 271-8585				PHONE:	(713) 835-0527 FAX: (713) 271-8585	
TOTAL Lic Capacity: 0			TITLE 18:		0		ICF/IID:		6	
Cert Alzh Capacity: 0			TITLE19:		0		PROGRAM TYPE:		ICF/IID SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds: 0			TITLE 18/19:		0		License Exp Dt:		09/01/2017	
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON	
Facility Information:			Facility ID:		007604		<u>Owner Information</u>			
UNITY HOUSE							EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
10507 OFFER ST							9901 LINN STATION ROAD			
HOUSTON			TX		77031		LOUISVILLE KY 40223-3808			
Phone	(713) 776-0072		Fax					PHONE:	(512) 498-2700 FAX: (512) 498-2777	
TOTAL Lic Capacity: 0			TITLE 18:		0		ICF/IID:		6	
Cert Alzh Capacity: 0			TITLE19:		0		PROGRAM TYPE:		ICF/IID SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds: 0			TITLE 18/19:		0		License Exp Dt:		07/31/2018	
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON	
Facility Information:			Facility ID:		007369		<u>Owner Information</u>			
WEST ROAD HOUSE							DIVERSITY GROUP LC			
7811 WEST ROAD							7807 LONG POINT #106			
HOUSTON			TX		77064		HOUSTON TX 77055			
Phone	(713) 937-6908		Fax	(281) 888-2785				PHONE:	(281) 888-2490 FAX: (281) 888-2785	
TOTAL Lic Capacity: 0			TITLE 18:		0		ICF/IID:		6	
Cert Alzh Capacity: 0			TITLE19:		0		PROGRAM TYPE:		ICF/IID SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds: 0			TITLE 18/19:		0		License Exp Dt:		03/01/2017	
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON	
Facility Information:			Facility ID:		003721		<u>Owner Information</u>			
WESTBURY HOUSE							MHMR AUTHORITY OF HARRIS COUNTY			
5707 WARM SPRINGS							2850 FANNIN			
HOUSTON			TX		77035		HOUSTON TX 77265-5381			
Phone	(713) 723-5589		Fax					PHONE:	(713) 750-5600 FAX:	
TOTAL Lic Capacity: 0			TITLE 18:		0		ICF/IID:		6	
Cert Alzh Capacity: 0			TITLE19:		0		PROGRAM TYPE:		ICF/IID SERVICE TYPE GOVERNMENT BASED	
PRIVATE Beds: 0			TITLE 18/19:		0		License Exp Dt:			
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON	
Facility Information:			Facility ID:		003941		<u>Owner Information</u>			
WESTLAKE FOREST							EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
2422 HEATHER GOLD							9901 LINN STATION ROAD			
HOUSTON			TX		77084		LOUISVILLE KY 40223-3808			
Phone	(281) 578-7050		Fax					PHONE:	(512) 498-2700 FAX: (512) 498-2777	
TOTAL Lic Capacity: 0			TITLE 18:		0		ICF/IID:		6	
Cert Alzh Capacity: 0			TITLE19:		0		PROGRAM TYPE:		ICF/IID SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds: 0			TITLE 18/19:		0		License Exp Dt:		03/01/2018	
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON	
Facility Information:			Facility ID:		007571		<u>Owner Information</u>			
WESTVIEW I							QHS ENTERPRISES INC			
10018 WESTVIEW DR							2926 COLONEL COURT DR			
HOUSTON			TX		77055		RICHMOND TX 77406			
Phone	(713) 722-7102		Fax	(713) 722-7155				PHONE:	(281) 375-5507 FAX:	
TOTAL Lic Capacity: 0			TITLE 18:		0		ICF/IID:		6	
Cert Alzh Capacity: 0			TITLE19:		0		PROGRAM TYPE:		ICF/IID SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds: 0			TITLE 18/19:		0		License Exp Dt:		11/19/2017	

County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON	
Facility Information:			Facility ID:		003940		<u>Owner Information</u>			
WOODEDGE							EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
11914 GREEN CREEK CIRCLE							9901 LINN STATION ROAD			
HOUSTON			TX		77070		LOUISVILLE KY 40223-3808			
Phone	(281) 469-8589		Fax	(512) 498-2777				PHONE:		(512) 498-2700 FAX: (512) 498-2777
TOTAL Lic Capacity:			0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:			0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:			0	TITLE 18/19:		0	License Exp Dt:		01/25/2018	
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON	
Facility Information:			Facility ID:		007328		<u>Owner Information</u>			
TARA COMMUNITY HOME							EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
13515 TARA OAK DRIVE							9901 LINN STATION ROAD			
JERSEY VILLAGE			TX		77065-3744		LOUISVILLE KY 40223-3808			
Phone	(281) 894-2822		Fax					PHONE:		(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:			0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:			0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:			0	TITLE 18/19:		0	License Exp Dt:		01/01/2017	
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON	
Facility Information:			Facility ID:		003688		<u>Owner Information</u>			
APPLEWHITE							MHMR AUTHORITY OF HARRIS COUNTY			
526 APPLEWHITE DRIVE							2850 FANNIN			
KATY			TX		77450		HOUSTON TX 77265-5381			
Phone	(713) 392-4482		Fax					PHONE:		(713) 750-5600 FAX:
TOTAL Lic Capacity:			0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:			0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds:			0	TITLE 18/19:		0	License Exp Dt:			
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON	
Facility Information:			Facility ID:		007540		<u>Owner Information</u>			
MEADOWPLACE LIVING CENTER							DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC			
5205 MEADOW PLACE							4115 GALVESTON RD			
LA PORTE			TX		77571		HOUSTON TX 77017			
Phone	(713) 475-2220		Fax	(713) 475-2332				PHONE:		(713) 475-2228 FAX: (713) 475-2212
TOTAL Lic Capacity:			0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:			0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:			0	TITLE 18/19:		0	License Exp Dt:		01/01/2017	
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON	
Facility Information:			Facility ID:		007462		<u>Owner Information</u>			
SHELL ROCK LIVING CENTER							DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC			
9734 SHELL ROCK							4115 GALVESTON RD			
LA PORTE			TX		77571		HOUSTON TX 77017			
Phone	(713) 475-2220		Fax	(713) 472-2332				PHONE:		(713) 475-2228 FAX: (713) 475-2212
TOTAL Lic Capacity:			0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:			0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:			0	TITLE 18/19:		0	License Exp Dt:		01/01/2017	
County	HARRIS		Reg Svcs:		UNIT 21 (ICF/MR)		Region		06 - HOUSTON	
Facility Information:			Facility ID:		003694		<u>Owner Information</u>			
FELLOWS BLOCK							EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
3419 BOCA RATON DRIVE							9901 LINN STATION ROAD			
MISSOURI CITY			TX		77459		LOUISVILLE KY 40223-3808			
Phone	(281) 835-9303		Fax					PHONE:		(512) 498-2700 FAX: (512) 498-2777
TOTAL Lic Capacity:			0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:			0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:			0	TITLE 18/19:		0	License Exp Dt:		07/31/2018	

County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
Facility Information:		Facility ID:	007218		<u>Owner Information</u>			
FROSTVIEW HOUSE					FROSTVIEW LANE LLC			
7310 FROSTVIEW LN					820 PARK TWO			
MISSOURI CITY		TX	77489		SUGARLAND		TX	77478
Phone	(713) 271-0480	Fax	(713) 271-8585		PHONE:	(713) 835-0527	FAX:	(713) 271-8585
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6			
Cert Alzh Capacity:	0	TITLE19:	0					
PRIVATE Beds:	0	TITLE 18/19:	0					
				License Exp Dt:		09/01/2017		
County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
Facility Information:		Facility ID:	007346		<u>Owner Information</u>			
JUDY LIVING CENTER					DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC			
2012 JUDY LN					4115 GALVESTON RD			
PASADENA		TX	77502		HOUSTON		TX	77017
Phone	(713) 477-5461	Fax	(713) 475-2332		PHONE:	(713) 475-2228	FAX:	(713) 475-2212
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6			
Cert Alzh Capacity:	0	TITLE19:	0					
PRIVATE Beds:	0	TITLE 18/19:	0					
				License Exp Dt:		01/01/2017		
County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
Facility Information:		Facility ID:	007807		<u>Owner Information</u>			
PASADENA COTTAGE					MHMR AUTHORITY OF HARRIS COUNTY			
2122 WICHITA					2850 FANNIN			
PASADENA		TX	77502		HOUSTON		TX	77265-5381
Phone	(713) 472-3470	Fax			PHONE:	(713) 750-5600	FAX:	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6			
Cert Alzh Capacity:	0	TITLE19:	0					
PRIVATE Beds:	0	TITLE 18/19:	0					
				License Exp Dt:				
County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
Facility Information:		Facility ID:	007818		<u>Owner Information</u>			
PASADENA COTTAGE B					MHMR AUTHORITY OF HARRIS COUNTY			
2122 WICHITA					2850 FANNIN			
PASADENA		TX	77502		HOUSTON		TX	77265-5381
Phone	(713) 472-3470	Fax			PHONE:	(713) 750-5600	FAX:	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6			
Cert Alzh Capacity:	0	TITLE19:	0					
PRIVATE Beds:	0	TITLE 18/19:	0					
				License Exp Dt:				
County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
Facility Information:		Facility ID:	007322		<u>Owner Information</u>			
PONCA LIVING CENTER					DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC			
4314 PONCA STREET					4115 GALVESTON RD			
PASADENA		TX	77504		HOUSTON		TX	77017
Phone	(713) 475-2228	Fax	(713) 475-2212		PHONE:	(713) 475-2228	FAX:	(713) 475-2212
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6			
Cert Alzh Capacity:	0	TITLE19:	0					
PRIVATE Beds:	0	TITLE 18/19:	0					
				License Exp Dt:		01/01/2019		
County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
Facility Information:		Facility ID:	007336		<u>Owner Information</u>			
SAN JACINTO LIVING CENTER					DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC			
2406 SAN JACINTO DRIVE					4115 GALVESTON RD			
PASADENA		TX	77502		HOUSTON		TX	77017
Phone	(713) 475-2220	Fax	(713) 472-2332		PHONE:	(713) 475-2228	FAX:	(713) 475-2212
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6			
Cert Alzh Capacity:	0	TITLE19:	0					
PRIVATE Beds:	0	TITLE 18/19:	0					
				License Exp Dt:		01/01/2017		

County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
Facility Information:		Facility ID:	007378		<u>Owner Information</u>			
GREEN VALLEY HOUSE					EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
5202 ALAMOSA LN					9901 LINN STATION ROAD			
SPRING		TX	77379		LOUISVILLE KY 40223-3808			
Phone	(832) 717-0065		Fax			PHONE: (512) 498-2700 FAX: (512) 498-2777		
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID: 6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt: 07/31/2018		
County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
Facility Information:		Facility ID:	003887		<u>Owner Information</u>			
MEADOWHILL COMMUNITY HOME					EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
21710 MEADOWHILL DR					9901 LINN STATION ROAD			
SPRING		TX	77373		LOUISVILLE KY 40223-3808			
Phone	(281) 353-7879		Fax			PHONE: (502) 394-2100 FAX: (502) 394-2285		
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID: 6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt: 01/01/2017		
County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
Facility Information:		Facility ID:	003847		<u>Owner Information</u>			
PASSION HOUSE					EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
19110 CANDLETRAIL DRIVE					9901 LINN STATION ROAD			
SPRING		TX	77388		LOUISVILLE KY 40223-3808			
Phone	(281) 528-9570		Fax	(713) 434-5041		PHONE: (512) 498-2700 FAX: (512) 498-2777		
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID: 6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt: 07/31/2018		
County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
Facility Information:		Facility ID:	003990		<u>Owner Information</u>			
SPRING GROUP HOME					BETHESDA LUTHERAN COMMUNITIES INC			
17403 DEER CREEK					18937 K Z RD			
SPRING		TX	77379		CYPRESS TX 77433			
Phone	(281) 576-4000		Fax	(281) 351-5897		PHONE: (281) 516-4000 FAX: (281) 351-5897		
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID: 6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt: 01/25/2018		
County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
Facility Information:		Facility ID:	003892		<u>Owner Information</u>			
VERDECOVE COMMUNITY HOME					EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
21023 VERDECOVE LANE					9901 LINN STATION ROAD			
SPRING		TX	77388-4342		LOUISVILLE KY 40223-3808			
Phone	(281) 350-2836		Fax			PHONE: (502) 394-2100 FAX: (502) 394-2285		
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID: 6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt: 01/01/2019		
County	HARRIS		Reg Svcs:	ICF/IID TEAM		Region	06 - HOUSTON	
Facility Information:		Facility ID:	003817		<u>Owner Information</u>			
CHOCTAW GROUP HOME					UCG CENTRAL TEXAS HOLDINGS LLC			
11719 COCONINO LANE					750 RUSK			
TOMBALL		TX	77377		NEW BRAUNFELS TX 78130			
Phone	(281) 255-9006		Fax	(214) 723-5331		PHONE: (830) 372-2920 FAX: (214) 723-5331		
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID: 8		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		

County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON			
Facility Information:		Facility ID:	105856		<u>Owner Information</u>					
CHOCTAW GROUP HOME					UCG CENTRAL TEXAS HOLDINGS LLC					
11719 COCONINO LANE					750 RUSK					
TOMBALL		TX	77377		NEW BRAUNFELS TX 78130					
Phone	(281) 255-9006		Fax							
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		8		
Cert Alzh Capacity:		0	TITLE19:		0	PHONE:		(830) 372-2920		
PRIVATE Beds:		0	TITLE 18/19:		0	FAX:		(214) 723-5331		
					PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
					License Exp Dt:		09/01/2017			
County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON			
Facility Information:		Facility ID:	003607		<u>Owner Information</u>					
LIMERICK LANE					REACH UNLIMITED INC					
14119 LIMERICK LN					12777 JONES RD ,#103					
TOMBALL		TX	77375		HOUSTON TX 77070					
Phone	(281) 351-6612		Fax	(281) 357-4680		PHONE:			(281) 469-8058	
TOTAL Lic Capacity:		0	TITLE 18:		0	FAX:		(281) 469-5030		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		06/13/2018		
County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON			
Facility Information:		Facility ID:	003986		<u>Owner Information</u>					
TOMBALL HILLS HOME					BETHESDA LUTHERAN COMMUNITIES INC					
31111 STELLA LN					18937 K Z RD					
TOMBALL		TX	77375		CYPRESS TX 77433					
Phone	(281) 516-4000		Fax	(281) 351-5897		PHONE:			(281) 516-4000	
TOTAL Lic Capacity:		0	TITLE 18:		0	FAX:		(281) 351-5897		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		08/02/2018		
County	HARRIS		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON			
Facility Information:		Facility ID:	003989		<u>Owner Information</u>					
WHITE RIVER					REACH UNLIMITED INC					
12335 WHITE RIVER					12777 JONES RD ,#103					
TOMBALL		TX	77375		HOUSTON TX 77070					
Phone	(281) 351-9735		Fax	(281) 351-5868		PHONE:			(281) 469-8058	
TOTAL Lic Capacity:		0	TITLE 18:		0	FAX:		(281) 469-5030		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/18/2018		
County	HARRISON		Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER			
Facility Information:		Facility ID:	007427		<u>Owner Information</u>					
PINE HAVEN					HARMONY LIVING CENTERS INC					
2402 PALATO DR					112 S WARD DR					
MARSHALL		TX	75670		LONGVIEW TX 75604					
Phone	(903) 935-0468		Fax			PHONE:			(903) 295-7391	
TOTAL Lic Capacity:		0	TITLE 18:		0	FAX:		(903) 295-7394		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		10/01/2018		
County	HARRISON		Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER			
Facility Information:		Facility ID:	007440		<u>Owner Information</u>					
SUGAR CREEK					HARMONY LIVING CENTERS INC					
101 ROSEBUD DRIVE					112 S WARD DR					
MARSHALL		TX	75672		LONGVIEW TX 75604					
Phone	(903) 935-0263		Fax	(903) 934-8484		PHONE:			(903) 295-7391	
TOTAL Lic Capacity:		0	TITLE 18:		0	FAX:		(903) 295-7394		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		10/01/2018		

County	HAYS		Reg Svcs:		IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007542		<u>Owner Information</u>				
CEDAR VALLEY COMMUNITY RESIDENCE				RESCARE SERVICES INC					
12800 DANIEL BOONE DR				3711 SAN ANTONIO ST					
AUSTIN		TX	78737			AUSTIN	TX	78734-2126	
Phone	(512) 288-4259	Fax	(512) 328-1832			PHONE:	(512) 328-1832	FAX:	(512) 328-1833
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:	06/09/2018		
PRIVATE Beds:	0	TITLE 18/19:	0						
County	HAYS		Reg Svcs:		IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	104575		<u>Owner Information</u>				
SUN BONNET COMMUNITY RESIDENCE				D & S RESIDENTIAL SERVICES LP					
500 REBEL DRIVE				8911 N CAPITAL OF TX HWY					
BUDA		TX	78610			AUSTIN	TX	,BLDG 1 STE 1300	
Phone	(512) 312-2228	Fax	(512) 504-9639			AUSTIN	TX	78759	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PHONE:	(512) 327-2325	FAX:	(512) 327-5355
Cert Alzh Capacity:	0	TITLE19:	0			PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	12/01/2017		
County	HAYS		Reg Svcs:		IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007300		<u>Owner Information</u>				
PEACHTREE COMMUNITY RESIDENCE				D & S RESIDENTIAL SERVICES LP					
101 SPRINGLAKE DR				8911 N CAPITAL OF TX HWY					
DRIPPING SPRINGS		TX	78620			AUSTIN	TX	,BLDG 1 STE 1300	
Phone	(512) 894-4230	Fax	(512) 327-7181			AUSTIN	TX	78759	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PHONE:	(512) 327-2325	FAX:	(512) 327-5355
Cert Alzh Capacity:	0	TITLE19:	0			PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	12/01/2017		
County	HAYS		Reg Svcs:		IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007278		<u>Owner Information</u>				
LAGO VISTA				UCG CENTRAL TEXAS HOLDINGS LLC					
1129 LAGO VISTA				750 RUSK					
SAN MARCOS		TX	78666			NEW BRAUNFELS	TX	78130	
Phone	(512) 392-0099	Fax	(214) 723-5331			PHONE:	(830) 372-2920	FAX:	(214) 723-5331
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:	09/01/2017		
PRIVATE Beds:	0	TITLE 18/19:	0						
County	HAYS		Reg Svcs:		IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	003650		<u>Owner Information</u>				
MCCARTY HOUSE				R & K SPECIALIZED HOMES INC					
2206 MCCARTY LN				1550 NE LOOP 410					
SAN MARCOS		TX	78666			SAN ANTONIO	TX	,STE 206	
Phone	(512) 392-0666	Fax	(210) 651-3078			SAN ANTONIO	TX	78209	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PHONE:	(210) 805-0802	FAX:	(210) 805-0744
Cert Alzh Capacity:	0	TITLE19:	0			PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	03/01/2017		
County	HAYS		Reg Svcs:		IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	003919		<u>Owner Information</u>				
MOCKINGBIRD VILLA				UCG CENTRAL TEXAS HOLDINGS LLC					
1502 MOCKINGBIRD LN				750 RUSK					
SAN MARCOS		TX	78666			NEW BRAUNFELS	TX	78130	
Phone	(512) 392-0088	Fax	(214) 723-5331			PHONE:	(830) 372-2920	FAX:	(214) 723-5331
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:	09/01/2017		
PRIVATE Beds:	0	TITLE 18/19:	0						

County	HAYS	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>	<b>Facility ID:</b> 105956	<b>Owner Information</b>			
R&K SPECIALIZED HOMES, INC.		R & K SPECIALIZED HOMES INC			
707 EASTON DR		1550 NE LOOP 410			
SAN MARCOS	TX 78666	,STE 206			
<b>Phone</b> (210) 805-0802	<b>Fax</b> (210) 805-0744	SAN ANTONIO TX 78209			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (210) 805-0802	<b>FAX:</b> (210) 805-0744	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 09/23/2018		
County	HAYS	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>	<b>Facility ID:</b> 003874	<b>Owner Information</b>			
RIO BLANCO		UCG CENTRAL TEXAS HOLDINGS LLC			
1010 E UHLAND RD		750 RUSK			
SAN MARCOS	TX 78666	NEW BRAUNFELS TX 78130			
<b>Phone</b> (512) 392-0999	<b>Fax</b> (214) 723-5331				
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (830) 372-2920	<b>FAX:</b> (214) 723-5331	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 09/01/2017		
County	HENDERSON	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
<b>Facility Information:</b>	<b>Facility ID:</b> 010354	<b>Owner Information</b>			
ATHENS PLACE GROUP HOME		ANDREWS CENTER			
4875 FM 2709		2323 W FRONT ST			
ATHENS	TX 75751	TYLER TX 75702			
<b>Phone</b> (903) 675-6784	<b>Fax</b>				
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 8	<b>PHONE:</b> (903) 567-1351	<b>FAX:</b> (903) 535-7384	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> GOVERNMENT BASED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b>		
County	HIDALGO	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
<b>Facility Information:</b>	<b>Facility ID:</b> 003602	<b>Owner Information</b>			
207 ENFIELD		SOUTH TEXAS COMMUNITY LIVING CORP			
207 ENFIELD		18 AUGUSTA PINES DR			
EDINBURG	TX 78539	,STE 140 E			
<b>Phone</b> (956) 631-0045	<b>Fax</b> (956) 631-6156	SPRING TX 77389			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (281) 351-1758	<b>FAX:</b> (210) 255-4500	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 03/01/2018		
County	HIDALGO	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
<b>Facility Information:</b>	<b>Facility ID:</b> 003956	<b>Owner Information</b>			
922 DIANA DRIVE		SOUTH TEXAS COMMUNITY LIVING CORP			
922 DIANA DRIVE		18 AUGUSTA PINES DR			
EDINBURG	TX 78542	,STE 140 E			
<b>Phone</b> (956) 381-0026	<b>Fax</b> (956) 631-6156	SPRING TX 77389			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (281) 351-1758	<b>FAX:</b> (210) 255-4500	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 03/01/2018		
County	HIDALGO	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
<b>Facility Information:</b>	<b>Facility ID:</b> 007470	<b>Owner Information</b>			
32ND STREET NORTH GROUP HOME		SOUTH TEXAS COMMUNITY LIVING CORP			
5313 N 32ND ST		18 AUGUSTA PINES DR			
MCALLEN	TX 78504	,STE 140 E			
<b>Phone</b> (956) 618-5745	<b>Fax</b> (956) 631-6156	SPRING TX 77389			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (281) 351-1758	<b>FAX:</b> (210) 255-4500	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 03/01/2018		



County	HIDALGO		Reg Svcs:		CORPUS CHRISTI 61		Region		11 - CORPUS CHRISTI	
Facility Information:			Facility ID:		007525		<u>Owner Information</u>			
6000 NORTH 26TH STREET							SOUTH TEXAS COMMUNITY LIVING CORP			
6000 N 26TH ST							18 AUGUSTA PINES DR			
MCALLEN			TX		78504				,STE 140 E	
Phone			(956) 631-3070		Fax		(956) 631-6156		SPRING TX 77389	
TOTAL Lic Capacity:			0		TITLE 18:		0		ICF/IID: 6	
Cert Alzh Capacity:			0		TITLE19:		0		PHONE: (281) 351-1758	
PRIVATE Beds:			0		TITLE 18/19:		0		FAX: (210) 255-4500	
									PROGRAM TYPE: ICF/IID	
									SERVICE TYPE PRIVATELY OWNED	
									License Exp Dt: 03/01/2018	
County	HIDALGO		Reg Svcs:		CORPUS CHRISTI 61		Region		11 - CORPUS CHRISTI	
Facility Information:			Facility ID:		007507		<u>Owner Information</u>			
BRIARWOOD HOME							SOUTH TEXAS COMMUNITY LIVING CORP			
2406 BRIARWOOD							18 AUGUSTA PINES DR			
MISSION			TX		78574				,STE 140 E	
Phone			(956) 585-7192		Fax		(956) 631-6156		SPRING TX 77389	
TOTAL Lic Capacity:			0		TITLE 18:		0		ICF/IID: 6	
Cert Alzh Capacity:			0		TITLE19:		0		PHONE: (281) 351-1758	
PRIVATE Beds:			0		TITLE 18/19:		0		FAX: (210) 255-4500	
									PROGRAM TYPE: ICF/IID	
									SERVICE TYPE PRIVATELY OWNED	
									License Exp Dt: 03/01/2018	
County	HOCKLEY		Reg Svcs:		HIGH PLAINS ICF/MR		Region		01 - LUBBOCK	
Facility Information:			Facility ID:		007455		<u>Owner Information</u>			
SUNRISE GROUP HOME							EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
308 W 7TH STREET							9901 LINN STATION RD			
SUNDOWN			TX		79372				LOUISVILLE KY 40223	
Phone			(806) 229-2153		Fax		(806) 894-9605		PHONE: (502) 394-2100	
TOTAL Lic Capacity:			0		TITLE 18:		0		FAX: (502) 394-2285	
Cert Alzh Capacity:			0		TITLE19:		0		PROGRAM TYPE: ICF/IID	
PRIVATE Beds:			0		TITLE 18/19:		0		SERVICE TYPE PRIVATELY OWNED	
									License Exp Dt: 08/01/2017	
County	HOOD		Reg Svcs:		IID TEAM		Region		03 - ARLINGTON	
Facility Information:			Facility ID:		003779		<u>Owner Information</u>			
GRANBURY HOUSE							SOUTHERN CONCEPTS INC			
826 N. THORP SPRINGS ROAD							PO BOX 758			
GRANBURY			TX		76049				GRANBURY TX 76048	
Phone			(817) 573-1559		Fax		(817) 579-6611		PHONE: (817) 573-6922	
TOTAL Lic Capacity:			0		TITLE 18:		0		FAX: (817) 579-6611	
Cert Alzh Capacity:			0		TITLE19:		0		PROGRAM TYPE: ICF/IID	
PRIVATE Beds:			0		TITLE 18/19:		0		SERVICE TYPE PRIVATELY OWNED	
									License Exp Dt: 04/01/2018	
County	HOOD		Reg Svcs:		IID TEAM		Region		03 - ARLINGTON	
Facility Information:			Facility ID:		007382		<u>Owner Information</u>			
6TH AND MESQUITE							SOUTHERN CONCEPTS INC			
407 E SIXTH ST							PO BOX 758			
TOLAR			TX		76476				GRANBURY TX 76048	
Phone			(254) 835-4977		Fax		(817) 579-6611		PHONE: (817) 573-6922	
TOTAL Lic Capacity:			0		TITLE 18:		0		FAX: (817) 579-6611	
Cert Alzh Capacity:			0		TITLE19:		0		PROGRAM TYPE: ICF/IID	
PRIVATE Beds:			0		TITLE 18/19:		0		SERVICE TYPE PRIVATELY OWNED	
									License Exp Dt: 04/01/2018	
County	HOWARD		Reg Svcs:		ICF/IID		Region		09 - ABILENE	
Facility Information:			Facility ID:		003792		<u>Owner Information</u>			
COMANCHE FLATS							D & S RESIDENTIAL SERVICES LP			
1315 BAYLOR							8911 N CAPITAL OF TX HWY			
BIG SPRING			TX		79720				,BLDG 1 STE 1300	
Phone			(432) 263-1408		Fax		(512) 327-5355		AUSTIN TX 78759	
TOTAL Lic Capacity:			0		TITLE 18:		0		PHONE: (512) 327-2325	
Cert Alzh Capacity:			0		TITLE19:		0		FAX: (512) 327-5355	
PRIVATE Beds:			0		TITLE 18/19:		0		PROGRAM TYPE: ICF/IID	
									SERVICE TYPE PRIVATELY OWNED	
									License Exp Dt: 12/01/2017	

County	HUNT		Reg Svcs:		IID TEAM		Region		03 - ARLINGTON	
Facility Information:		Facility ID:		003937		<u>Owner Information</u>				
BONNIE LEA GROUP HOME						LAKES REGIONAL MHMR CENTER				
3408 BONNIE LEA						PO BOX 747				
GREENVILLE		TX	75402			TERRELL		TX	75160	
Phone	(903) 455-4476		Fax				PHONE:		(972) 388-2000	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	FAX:	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE GOVERNMENT BASED	
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:				
County	HUNT		Reg Svcs:		IID TEAM		Region		03 - ARLINGTON	
Facility Information:		Facility ID:		003669		<u>Owner Information</u>				
GARBER HOUSE						COMMUNITY ACCESS INC				
3506 GARBER CIR						2040 SHILOH RD				
GREENVILLE		TX	75402			TYLER		TX	75703	
Phone	(903) 454-3387		Fax		(903) 450-4201		PHONE:		(903) 579-8527	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	FAX:	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		04/01/2017		
County	HUNT		Reg Svcs:		IID TEAM		Region		03 - ARLINGTON	
Facility Information:		Facility ID:		007205		<u>Owner Information</u>				
PATTI J HOUSE						COMMUNITY ACCESS INC				
100 PATTI J						2040 SHILOH RD				
GREENVILLE		TX	75402			TYLER		TX	75703	
Phone	(903) 454-2568		Fax		(903) 450-4201		PHONE:		(903) 579-8527	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	FAX:	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		04/01/2017		
County	HUNT		Reg Svcs:		IID TEAM		Region		03 - ARLINGTON	
Facility Information:		Facility ID:		007549		<u>Owner Information</u>				
SAYLE STREET GROUP HOME						LAKES REGIONAL MHMR CENTER				
6518 SAYLE ST						PO BOX 747				
GREENVILLE		TX	75402			TERRELL		TX	75160	
Phone	(903) 455-7270		Fax				PHONE:		(972) 388-2000	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	FAX:	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE GOVERNMENT BASED	
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:				
County	HUNT		Reg Svcs:		IID TEAM		Region		03 - ARLINGTON	
Facility Information:		Facility ID:		007543		<u>Owner Information</u>				
TANGLEWOOD GROUP HOME						LAKES REGIONAL MHMR CENTER				
1001 TANGLEWOOD						PO BOX 747				
GREENVILLE		TX	75401			TERRELL		TX	75160	
Phone	(903) 455-3987		Fax				PHONE:		(972) 388-2000	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	FAX:	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE GOVERNMENT BASED	
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:				
County	HUNT		Reg Svcs:		IID TEAM		Region		03 - ARLINGTON	
Facility Information:		Facility ID:		007282		<u>Owner Information</u>				
TERRY PLACE						COMMUNITY ACCESS INC				
2500 TERRY PL						2040 SHILOH RD				
GREENVILLE		TX	75402			TYLER		TX	75703	
Phone	(903) 455-4472		Fax		(903) 454-3363		PHONE:		(903) 579-8527	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	FAX:	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		04/01/2017		

County	HUNT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007460	Owner Information	
TURTLE CREEK FAMILY LIVING				LAKES REGIONAL MHMR CENTER	
505 ERMINE				PO BOX 747	
GREENVILLE		TX	75401	TERRELL	TX 75160
Phone	(903) 455-3987	Fax		PHONE:	(972) 388-2000
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	GOVERNMENT BASED
				License Exp Dt:	
County	JASPER	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:		Facility ID:	007643	Owner Information	
WEST BAY HOUSE				THE BURKE CENTER	
46 WEST BAY				1111	
JASPER		TX	75951		TX
Phone	(409) 384-2832	Fax		PHONE:	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	GOVERNMENT BASED
				License Exp Dt:	
County	JASPER	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:		Facility ID:	003906	Owner Information	
KIRBYVILLE GROUP HOME				THE BURKE CENTER	
703 W MARTIN LUTHER KING BLVD				4101 SOUTH MEDFORD DR	
KIRBYVILLE		TX	75956	LUFKIN	TX 75901
Phone	(409) 787-4132	Fax		PHONE:	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	GOVERNMENT BASED
				License Exp Dt:	
County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:		Facility ID:	007457	Owner Information	
ADA LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC	
5010 ADA				4115 GALVESTON ROAD	
BEAUMONT		TX	77706	HOUSTON	TX 77017
Phone	(409) 832-4112	Fax	(409) 832-8044	PHONE:	(713) 475-2228
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	01/01/2017
County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:		Facility ID:	003965	Owner Information	
BUCKINGHAM GROUP HOME				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
3550 AUSTIN ST				9901 LINN STATION RD	
BEAUMONT		TX	77706	LOUISVILLE	KY 40223
Phone	(409) 892-6455	Fax		PHONE:	(502) 394-2100
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	12/17/2017
County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:		Facility ID:	003964	Owner Information	
CAMBRIDGE GROUP HOME				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
5155 CAMBRIDGE				9901 LINN STATION RD	
BEAUMONT		TX	77707	LOUISVILLE	KY 40223
Phone	(409) 838-4231	Fax		PHONE:	(502) 394-2100
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	03/02/2018

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
<b>Facility Information:</b>	<b>Facility ID:</b> 003673	<b>Owner Information</b>			
CARNATION LIVING CENTER 6270 CARNATION BEAUMONT	TX 77703	DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC 4115 GALVESTON ROAD HOUSTON TX 77017			
<b>Phone</b> (409) 832-4112	<b>Fax</b> (409) 832-8044	<b>PHONE:</b> (713) 475-2228	<b>FAX:</b> (713) 472-2212		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 01/01/2017			
County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
<b>Facility Information:</b>	<b>Facility ID:</b> 007528	<b>Owner Information</b>			
CENTRAL HOUSE 4655 HOLST ST BEAUMONT	TX 77708	ST GILES - BAYTOWN INC 2203 KILGORE ROAD BAYTOWN TX 77520			
<b>Phone</b> (409) 833-4550	<b>Fax</b> (409) 833-0229	<b>PHONE:</b> (281) 837-1942	<b>FAX:</b> (281) 427-0586		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 09/01/2017			
County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
<b>Facility Information:</b>	<b>Facility ID:</b> 003672	<b>Owner Information</b>			
CHERYL LIVING CENTER 3895 CHERYL DRIVE BEAUMONT	TX 77706	DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC 4115 GALVESTON ROAD HOUSTON TX 77017			
<b>Phone</b> (409) 832-4112	<b>Fax</b> (409) 832-8044	<b>PHONE:</b> (713) 475-2228	<b>FAX:</b> (713) 472-2212		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 01/01/2017			
County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
<b>Facility Information:</b>	<b>Facility ID:</b> 003754	<b>Owner Information</b>			
COLE ROAD HOUSE 5820 COLE RD BEAUMONT	TX 77706	ST GILES - BAYTOWN INC 2203 KILGORE ROAD BAYTOWN TX 77520			
<b>Phone</b> (409) 896-2345	<b>Fax</b> (409) 835-0229	<b>PHONE:</b> (281) 837-1942	<b>FAX:</b> (281) 427-0586		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 13	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 09/01/2017			
County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
<b>Facility Information:</b>	<b>Facility ID:</b> 003791	<b>Owner Information</b>			
HORIZON HOUSE 4176 TREADWAY BEAUMONT	TX 77706	ST GILES - BAYTOWN INC 2203 KILGORE ROAD BAYTOWN TX 77520			
<b>Phone</b> (409) 833-4550	<b>Fax</b> (409) 833-0229	<b>PHONE:</b> (281) 837-1942	<b>FAX:</b> (281) 427-0586		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 8	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 09/01/2017			
County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
<b>Facility Information:</b>	<b>Facility ID:</b> 003689	<b>Owner Information</b>			
HUNTSMAN LIVING CENTER 535 CARNAHAN PLACE BEAUMONT	TX 77707	DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC 4115 GALVESTON ROAD HOUSTON TX 77017			
<b>Phone</b> (409) 832-4112	<b>Fax</b> (409) 832-6974	<b>PHONE:</b> (713) 475-2228	<b>FAX:</b> (713) 472-2212		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 01/01/2019			

County	JEFFERSON		Reg Svcs:	REGION 5 ICF/IID		Region	05 - BEAUMONT	
Facility Information:		Facility ID:	007307		<u>Owner Information</u>			
JERRY LIVING CENTER					DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC			
4415 JERRY DRIVE					4115 GALVESTON ROAD			
BEAUMONT		TX	77703		HOUSTON		TX	77017
Phone	(409) 832-4112	Fax	(409) 832-8044		PHONE:		(713) 475-2228	FAX: (713) 472-2212
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity:	0	TITLE19:	0			SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	01/01/2017	
County	JEFFERSON		Reg Svcs:	REGION 5 ICF/IID		Region	05 - BEAUMONT	
Facility Information:		Facility ID:	003966		<u>Owner Information</u>			
LANDIS GROUP HOME					EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
9165 LANDIS					9901 LINN STATION RD			
BEAUMONT		TX	77707		LOUISVILLE		KY	40223
Phone	(409) 860-4337	Fax		ICF/IID:	6	PHONE:		(502) 394-2100
TOTAL Lic Capacity:	0	TITLE 18:	0			FAX:	(502) 394-2285	
Cert Alzh Capacity:	0	TITLE19:	0			PROGRAM TYPE:	ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	03/01/2018	
County	JEFFERSON		Reg Svcs:	REGION 5 ICF/IID		Region	05 - BEAUMONT	
Facility Information:		Facility ID:	003674		<u>Owner Information</u>			
MCANELLY COMMUNITY HOME					DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC			
5125 MCANELLY					4115 GALVESTON ROAD			
BEAUMONT		TX	77708		HOUSTON		TX	77017
Phone	(409) 832-4112	Fax	(409) 832-6974		PHONE:		(713) 475-2228	FAX: (713) 472-2212
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity:	0	TITLE19:	0			SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	01/01/2019	
County	JEFFERSON		Reg Svcs:	REGION 5 ICF/IID		Region	05 - BEAUMONT	
Facility Information:		Facility ID:	007405		<u>Owner Information</u>			
MEADOWICK LIVING CENTER					DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC			
9640 MEADOWICK					4115 GALVESTON ROAD			
BEAUMONT		TX	77706		HOUSTON		TX	77017
Phone	(409) 832-4112	Fax	(409) 832-8044		PHONE:		(713) 475-2228	FAX: (713) 472-2212
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity:	0	TITLE19:	0			SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	01/01/2019	
County	JEFFERSON		Reg Svcs:	REGION 5 ICF/IID		Region	05 - BEAUMONT	
Facility Information:		Facility ID:	007326		<u>Owner Information</u>			
NORTH HOUSE					ST GILES - BAYTOWN INC			
8185 PARK N DR					2203 KILGORE ROAD			
BEAUMONT		TX	77708		BAYTOWN		TX	77520
Phone	(409) 833-4550	Fax	(409) 833-0229		PHONE:		(281) 837-1942	FAX: (281) 427-0586
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity:	0	TITLE19:	0			SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	09/01/2017	
County	JEFFERSON		Reg Svcs:	REGION 5 ICF/IID		Region	05 - BEAUMONT	
Facility Information:		Facility ID:	003690		<u>Owner Information</u>			
NOTTINGHAM LIVING CENTER					DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC			
5965 NAVAJO TRAIL					4115 GALVESTON ROAD			
BEAUMONT		TX	77708		HOUSTON		TX	77017
Phone	(409) 832-4112	Fax	(409) 832-8044		PHONE:		(713) 475-2228	FAX: (713) 472-2212
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity:	0	TITLE19:	0			SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	01/01/2017	

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
<b>Facility Information:</b>		<b>Facility ID:</b>	003692	<b>Owner Information</b>	
PINEHAVEN COMMUNITY HOME				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC	
10980 PINEHAVEN				4115 GALVESTON ROAD	
BEAUMONT				HOUSTON TX 77017	
<b>Phone</b>	(409) 832-4112	<b>Fax</b>	(409) 832-8044	<b>PHONE:</b>	(713) 475-2228
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2017
County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
<b>Facility Information:</b>		<b>Facility ID:</b>	003693	<b>Owner Information</b>	
SAMS WAY LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC	
1760 SAMS WAY				4115 GALVESTON ROAD	
BEAUMONT				HOUSTON TX 77017	
<b>Phone</b>	(409) 832-4112	<b>Fax</b>	(409) 832-6974	<b>PHONE:</b>	(713) 475-2228
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2019
County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
<b>Facility Information:</b>		<b>Facility ID:</b>	003697	<b>Owner Information</b>	
SAN DIEGO GROUP HOME				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
7585 SAN DIEGO				9901 LINN STATION RD	
BEAUMONT				LOUISVILLE KY 40223	
<b>Phone</b>	(409) 892-1784	<b>Fax</b>		<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	02/28/2018
County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
<b>Facility Information:</b>		<b>Facility ID:</b>	003677	<b>Owner Information</b>	
THOUSAND OAKS LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC	
8255 SHILOH				4115 GALVESTON ROAD	
BEAUMONT				HOUSTON TX 77017	
<b>Phone</b>	(409) 832-4112	<b>Fax</b>	(409) 832-6974	<b>PHONE:</b>	(713) 475-2228
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2019
County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
<b>Facility Information:</b>		<b>Facility ID:</b>	007567	<b>Owner Information</b>	
GRIFFIN LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC	
3905 28TH STREET				4115 GALVESTON ROAD	
PORT ARTHUR				HOUSTON TX 77017	
<b>Phone</b>	(409) 832-4112	<b>Fax</b>	(409) 832-8044	<b>PHONE:</b>	(713) 475-2228
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2017
County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
<b>Facility Information:</b>		<b>Facility ID:</b>	007574	<b>Owner Information</b>	
MODEL LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC	
411 5TH AVE				4115 GALVESTON ROAD	
PORT ARTHUR				HOUSTON TX 77017	
<b>Phone</b>	(409) 832-4112	<b>Fax</b>	(409) 832-6974	<b>PHONE:</b>	(713) 475-2228
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2019

County	JEFFERSON		Reg Svcs:	REGION 5 ICF/IID		Region	05 - BEAUMONT		
Facility Information:		Facility ID:	007530		<u>Owner Information</u>				
SHERIDAN LIVING CENTER					DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC				
2810 SHERIDAN					4115 GALVESTON ROAD				
PORT ARTHUR		TX	77640		HOUSTON TX		77017		
Phone	(409) 983-3512	Fax	(409) 832-6974		PHONE:	(713) 475-2228	FAX:	(713) 472-2212	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0						
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 01/01/2019					
County	JIM WELLS		Reg Svcs:	CORPUS CHRISTI 61		Region	11 - CORPUS CHRISTI		
Facility Information:		Facility ID:	007295		<u>Owner Information</u>				
GREEN ACRES					ASSISTED HOME CARE INC				
5927 S HWY 281					704 E FIRST ST				
ALICE		TX	78332		ALICE TX		78332		
Phone	(888) 528-8750	Fax	(361) 771-4311		PHONE:	(888) 528-8750	FAX:	(361) 881-4311	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0						
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 08/09/2018					
County	JIM WELLS		Reg Svcs:	CORPUS CHRISTI 61		Region	11 - CORPUS CHRISTI		
Facility Information:		Facility ID:	007309		<u>Owner Information</u>				
REYNOLDS HOME					ASSISTED HOME CARE INC				
601 N REYNOLDS					704 E FIRST ST				
ALICE		TX	78332		ALICE TX		78332		
Phone	(361) 668-0126	Fax	(361) 664-7776		PHONE:	(888) 528-8750	FAX:	(361) 881-4311	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0						
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 09/04/2017					
County	JOHNSON		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON		
Facility Information:		Facility ID:	003929		<u>Owner Information</u>				
OAK HOUSE					EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				
208 ALVARADO OAKS DR					9901 LINN STATION RD				
ALVARADO		TX	76009		LOUISVILLE KY		40223		
Phone	(817) 790-3476	Fax			PHONE:	(502) 394-2100	FAX:	(502) 394-2285	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0						
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 10/01/2017					
County	JOHNSON		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON		
Facility Information:		Facility ID:	003973		<u>Owner Information</u>				
EMERALD POINT					PECAN VALLEY MHMR REGION				
271 DIAMOND LN N					2101 WEST PEARL ST				
BURLESON		TX	76028		GRANBURY TX		76048		
Phone	(817) 295-3056	Fax	(817) 641-3619		PHONE:		FAX:		
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE	GOVERNMENT BASED
Cert Alzh Capacity:	0	TITLE19:	0						
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:					
County	JOHNSON		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON		
Facility Information:		Facility ID:	003961		<u>Owner Information</u>				
TURKEY PEAK					PECAN VALLEY MHMR REGION				
908 BROWNCREST					PO BOX 973				
BURLESON		TX	76028		STEPHENVILLE TX		76401		
Phone	(817) 447-9104	Fax	(817) 641-3619		PHONE:		FAX:		
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE	GOVERNMENT BASED
Cert Alzh Capacity:	0	TITLE19:	0						
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:					

County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003822	<b>Owner Information</b>			
COMMUNITY LIVING CONCEPTS INC		COMMUNITY LIVING CONCEPTS INC			
2764 CO RD 310		110 E WALNUT ST			
CLEBURNE	TX 76031	KEENE TX 76059			
<b>Phone</b> (817) 774-3615	<b>Fax</b> (817) 558-9560	<b>PHONE:</b> (817) 558-9559	<b>FAX:</b> (817) 558-9560		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 01/09/2017			
County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003806	<b>Owner Information</b>			
COMMUNITY LIVING CONCEPTS INC		COMMUNITY LIVING CONCEPTS INC			
1709 FM 2135		110 E WALNUT ST			
CLEBURNE	TX 76031	KEENE TX 76059			
<b>Phone</b> (817) 558-9559	<b>Fax</b> (817) 558-9560	<b>PHONE:</b> (817) 558-9559	<b>FAX:</b> (817) 558-9560		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 12	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 01/09/2019			
County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003865	<b>Owner Information</b>			
COMMUNITY LIVING CONCEPTS INC		COMMUNITY LIVING CONCEPTS INC			
201 FEATHERSTON		110 E WALNUT ST			
CLEBURNE	TX 76031	KEENE TX 76059			
<b>Phone</b> (817) 774-3613	<b>Fax</b> (817) 558-9560	<b>PHONE:</b> (817) 558-9559	<b>FAX:</b> (817) 558-9560		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 13	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 01/09/2017			
County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 007484	<b>Owner Information</b>			
FEATHERSTON		ROCK HOUSE SUPPORT SERVICES INC			
402 FEATHERSTON ST		2252 LINGLEVILLE ROAD HWY 8			
CLEBURNE	TX 76033	STEPHENVILLE TX 76401			
<b>Phone</b> (817) 645-4107	<b>Fax</b> (817) 556-3076	<b>PHONE:</b> (254) 968-4004	<b>FAX:</b> (254) 965-8653		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 11/01/2018			
County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003969	<b>Owner Information</b>			
HIGHLAND ESTATES		PECAN VALLEY MHMR REGION			
1018 HIGHLAND ROAD		2101 WEST PEARL ST			
CLEBURNE	TX 76031	GRANBURY TX 76048			
<b>Phone</b> (817) 556-3720	<b>Fax</b> (817) 641-3619	<b>PHONE:</b>	<b>FAX:</b>		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	GOVERNMENT BASED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b>			
County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003962	<b>Owner Information</b>			
QUAIL PARK		PECAN VALLEY MHMR REGION			
805 QUAIL PARK RUSH		2101 WEST PEARL ST			
CLEBURNE	TX 76031	GRANBURY TX 76048			
<b>Phone</b> (817) 556-3720	<b>Fax</b> (817) 641-3619	<b>PHONE:</b>	<b>FAX:</b>		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	GOVERNMENT BASED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b>			



County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	003970	<u>Owner Information</u>		
ROLLING ACRES			PECAN VALLEY MHMR REGION		
2901 FM 2280			2101 WEST PEARL ST		
CLEBURNE	TX	76031	GRANBURY	TX	76048
Phone	(817) 558-0642	Fax	(817) 558-0952	PHONE:	FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	GOVERNMENT BASED
License Exp Dt:					
County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	003924	<u>Owner Information</u>		
SPRUCE HOUSE			EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		
802 BERKLEY			9901 LINN STATION RD		
CLEBURNE	TX	76031	LOUISVILLE	KY	40223
Phone	(817) 517-5483	Fax	(512) 338-4182	PHONE:	(502) 394-2100
TOTAL Lic Capacity:	0	TITLE 18:	0	FAX:	(502) 394-2285
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
License Exp Dt: 12/03/2017					
County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	003625	<u>Owner Information</u>		
BLUEBONNET RESIDENTIAL CENTER 1			SCP ACQUISITION PARTNERS LTD		
524 N PEARSON ST			4244 RIVER BIRCH RD		
GODLEY	TX	76044-3702	FORT WORTH	TX	76137
Phone	(817) 389-3442	Fax	(817) 389-2354	PHONE:	(817) 847-5741
TOTAL Lic Capacity:	0	TITLE 18:	0	FAX:	(817) 847-5721
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
License Exp Dt: 03/01/2018					
County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	003622	<u>Owner Information</u>		
COMMUNITY LIVING CONCEPTS INC			COMMUNITY LIVING CONCEPTS INC		
802 DAVIS ST			110 E WALNUT ST		
GRANDVIEW	TX	76050	KEENE	TX	76059
Phone	(817) 558-9559	Fax	(817) 558-9560	PHONE:	(817) 558-9559
TOTAL Lic Capacity:	0	TITLE 18:	0	FAX:	(817) 558-9560
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
License Exp Dt: 01/09/2019					
County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	003820	<u>Owner Information</u>		
COMMUNITY LIVING CONCEPTS INC			COMMUNITY LIVING CONCEPTS INC		
712 STADIUM DR			110 E WALNUT ST		
JOSHUA	TX	76058	KEENE	TX	76059
Phone	(817) 774-3614	Fax	(817) 558-9560	PHONE:	(817) 558-9559
TOTAL Lic Capacity:	0	TITLE 18:	0	FAX:	(817) 558-9560
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
License Exp Dt: 01/09/2019					
County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	003972	<u>Owner Information</u>		
LITTLEBROOK ESTATES			PECAN VALLEY MHMR REGION		
105 LITTLEBROOK ROAD			2101 WEST PEARL ST		
JOSHUA	TX	76058	GRANBURY	TX	76048
Phone	(817) 645-0634	Fax	(817) 641-3619	PHONE:	FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	GOVERNMENT BASED
License Exp Dt:					

County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 007366	<b>Owner Information</b>			
COMMUNITY LIVING CONCEPTS INC		COMMUNITY LIVING CONCEPTS INC			
112 E WALNUT		110 E WALNUT ST			
KEENE	TX 76059	KEENE TX 76059			
<b>Phone</b> (817) 558-9559	<b>Fax</b> (817) 558-9560	<b>PHONE:</b> (817) 558-9559	<b>FAX:</b> (817) 558-9560		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 01/09/2019			
County	JONES	Reg Svcs:	ICF/IID	Region	02 - ABILENE
<b>Facility Information:</b>	<b>Facility ID:</b> 003705	<b>Owner Information</b>			
SAGEBRUSH LIVING CENTER		SAGEBRUSH LIVING CENTER LTD			
1101 COLUMBIA ST		845 PROTON RD			
STAMFORD	TX 79553	SAN ANTONIO TX 78258			
<b>Phone</b> (325) 773-2791	<b>Fax</b> (325) 773-2448	<b>PHONE:</b> (210) 340-7155	<b>FAX:</b> (210) 340-4832		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 86	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 07/01/2017			
County	LEE	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>	<b>Facility ID:</b> 007583	<b>Owner Information</b>			
COUNTRY CLUB HOUSE		JAMES-LEACH INC			
1070 CR 227		339 W COLORADO			
GIDDINGS	TX 78942	LA GRANGE TX 78945			
<b>Phone</b> (979) 542-9315	<b>Fax</b>	<b>PHONE:</b> (979) 968-8502	<b>FAX:</b> (979) 968-5210		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 01/26/2018			
County	LEE	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>	<b>Facility ID:</b> 007523	<b>Owner Information</b>			
EDGEWOOD HOUSE		JAMES-LEACH INC			
486 EDGEWOOD		339 W COLORADO			
GIDDINGS	TX 78942	LA GRANGE TX 78945			
<b>Phone</b> (979) 542-0360	<b>Fax</b>	<b>PHONE:</b> (979) 968-8502	<b>FAX:</b> (979) 968-5210		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 04/08/2018			
County	LEE	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>	<b>Facility ID:</b> 007471	<b>Owner Information</b>			
JOEKEL HOUSE		JAMES-LEACH INC			
666 JOEKEL		339 W COLORADO			
GIDDINGS	TX 78942	LA GRANGE TX 78945			
<b>Phone</b> (979) 542-1877	<b>Fax</b>	<b>PHONE:</b> (979) 968-8502	<b>FAX:</b> (979) 968-5210		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 10/08/2017			
County	LEE	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>	<b>Facility ID:</b> 007610	<b>Owner Information</b>			
WASHINGTON HOUSE		AUSTIN HEALTH RESOURCES INC			
259 CACTUS		9609 NEW FOUNDLAND CIRCLE			
GIDDINGS	TX 78942	AUSTIN TX 78758			
<b>Phone</b> (512) 835-8955	<b>Fax</b> (512) 835-8812	<b>PHONE:</b> (512) 835-8955	<b>FAX:</b> (512) 895-8812		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 06/01/2018			

County	LIBERTY	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003904	Owner Information			
LEE STREET HOUSE		TRI COUNTY MHMR SERVICES			
802 LEE ST		PO BOX 3067			
CLEVELAND	TX 77327	CONROE TX 77305			
Phone (719) 592-3651	Fax (409) 756-8331	PHONE:			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	FAX:		
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	GOVERNMENT BASED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt:			
County	LIBERTY	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003891	Owner Information			
LEGION STREET HOUSE		TRI COUNTY MHMR SERVICES			
206 CHARLES BARKER		PO BOX 3067			
CLEVELAND	TX 77327	CONROE TX 77305			
Phone (409) 756-8331	Fax	PHONE:			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	FAX:		
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	GOVERNMENT BASED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt:			
County	LIBERTY	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003982	Owner Information			
AVENUE B HOUSE		TRI COUNTY MHMR SERVICES			
201 AVE B RTE 3 BOX 65 P		PO BOX 3067			
LIBERTY	TX 77575	CONROE TX 77305			
Phone (409) 336-2629	Fax (409) 756-8331	PHONE:			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	FAX:		
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	GOVERNMENT BASED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt:			
County	LIBERTY	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007566	Owner Information			
HOLLY STREET HOUSE		TRI COUNTY MHMR SERVICES			
1420 HOLLY ST		PO BOX 3067			
LIBERTY	TX 77575	CONROE TX 77305			
Phone (409) 756-8122	Fax	PHONE:			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	FAX:		
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	GOVERNMENT BASED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt:			
County	LIMESTONE	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007512	Owner Information			
COMMERCE HOUSE		CEN-TEX ASSOCIATION FOR RETARDED CHILDREN			
811 E COMMERCE		PO DRAWER 750			
MEXIA	TX 76667	MEXIA TX 76667			
Phone (254) 562-6241	Fax (254) 562-5924	PHONE: (254) 562-2891			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	FAX: (254) 562-7656		
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 03/02/2018			
County	LIMESTONE	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007513	Owner Information			
FAIRWAY HOUSE		CEN-TEX ASSOCIATION FOR RETARDED CHILDREN			
1000 FAIRWAY		PO DRAWER 750			
MEXIA	TX 76667	MEXIA TX 76667			
Phone (254) 562-7960	Fax (254) 562-5924	PHONE: (254) 562-2891			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	FAX: (254) 562-7656		
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 03/03/2018			

County	LIMESTONE	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>		<b>Facility ID:</b>	007105	<b>Owner Information</b>	
MEXIA STATE SUPPORTED LIVING CENTER				DADS	
HIGHWAY 171				PO BOX 12668	
MEXIA		<b>TX</b>	76667	AUSTIN	TX 78711
<b>Phone</b>	(254) 562-2821	<b>Fax</b>	(254) 562-1444	<b>PHONE:</b>	(512) 454-3761
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	616
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	STATE SCHOOL/STATE CENTER
				<b>License Exp Dt:</b>	
County	LIMESTONE	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>		<b>Facility ID:</b>	007586	<b>Owner Information</b>	
TYLER HOUSE				CEN-TEX ASSOCIATION FOR RETARDED CHILDREN	
830 E TYLER				PO DRAWER 750	
MEXIA		<b>TX</b>	76667	MEXIA	TX 76667
<b>Phone</b>	(254) 562-6466	<b>Fax</b>	(254) 562-5924	<b>PHONE:</b>	(254) 562-2891
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	02/05/2018
County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
<b>Facility Information:</b>		<b>Facility ID:</b>	003908	<b>Owner Information</b>	
IDALOU COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
606 S MAIN				9901 LINN STATION ROAD	
IDALOU		<b>TX</b>	79329	LOUISVILLE	KY 40223-3808
<b>Phone</b>	(806) 894-4902	<b>Fax</b>	(806) 894-9605	<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2019
County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
<b>Facility Information:</b>		<b>Facility ID:</b>	007330	<b>Owner Information</b>	
23RD MANOR				ANNADALE MANOR INC.	
5423 23RD ST				7614 BAYLOR	
LUBBOCK		<b>TX</b>	79407	LUBBOCK	TX 79416
<b>Phone</b>	(806) 632-6588	<b>Fax</b>		<b>PHONE:</b>	(806) 632-6588
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	07/01/2017
County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
<b>Facility Information:</b>		<b>Facility ID:</b>	003848	<b>Owner Information</b>	
41ST STREET COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
3615 41ST ST				9901 LINN STATION ROAD	
LUBBOCK		<b>TX</b>	79413	LOUISVILLE	KY 40223-3808
<b>Phone</b>	(806) 894-4902	<b>Fax</b>	(806) 894-9605	<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2019
County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
<b>Facility Information:</b>		<b>Facility ID:</b>	007344	<b>Owner Information</b>	
5735 DARTMOUTH DRIVE				CALAB INC	
5735 DARTMOUTH DR				3803 S ROBINSON RD	
LUBBOCK		<b>TX</b>	79416	GRAND PRAIRIE	TX 75052-1239
<b>Phone</b>	(806) 793-6608	<b>Fax</b>	(806) 767-0687	<b>PHONE:</b>	(972) 263-2112
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	09/01/2017

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:		Facility ID:	003679	Owner Information	
5TH STREET COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
7423 5TH ST				9901 LINN STATION ROAD	
LUBBOCK		TX	79416-6519	LOUISVILLE KY 40223-3808	
Phone	(806) 894-4902	Fax	(806) 894-9605	PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2019
County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:		Facility ID:	007447	Owner Information	
6603 DOVER AVENUE				CALAB INC	
6603 DOVER AVE				3803 S ROBINSON RD	
LUBBOCK		TX	79423	GRAND PRAIRIE TX 75052-1239	
Phone	(806) 767-0685	Fax	(806) 767-0687	PHONE:	(972) 263-2112 FAX: (972) 263-2115
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/01/2017
County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:		Facility ID:	007448	Owner Information	
7409 RICHMOND AVENUE				CALAB INC	
7409 RICHMOND AVE				3803 S ROBINSON RD	
LUBBOCK		TX	79424	GRAND PRAIRIE TX 75052-1239	
Phone	(806) 795-8920	Fax	(806) 767-0687	PHONE:	(972) 263-2112 FAX: (972) 263-2115
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	09/01/2017
County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:		Facility ID:	003881	Owner Information	
97TH STREET COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
2404 97TH ST				9901 LINN STATION ROAD	
LUBBOCK		TX	79423-4406	LOUISVILLE KY 40223-3808	
Phone	(806) 894-4902	Fax	(806) 894-9605	PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2017
County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:		Facility ID:	007201	Owner Information	
AGNES DENT HOMES I				CONNIE FULBRIGHT	
4805 16TH ST				4805 16TH ST	
LUBBOCK		TX	79416	LUBBOCK TX 79416	
Phone	(806) 797-3660	Fax	(806) 797-6681	PHONE:	(806) 797-3660 FAX: (806) 797-6681
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	04/01/2018
County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:		Facility ID:	007350	Owner Information	
B & B SERVICES				BRANDIE FULBRIGHT	
5322 22ND ST				5322 22ND STREET	
LUBBOCK		TX	79407	LUBBOCK TX 79407	
Phone	(210) 268-7759	Fax		PHONE:	(210) 268-1159 FAX: (361) 998-9748
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	10/01/2018

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID:	007334	Owner Information		
CAPROCK			ROCK HOUSE SUPPORT SERVICES INC		
6201 LYNNHAVEN DR			2252 LINGLEVILLE ROAD HWY 8		
LUBBOCK	TX	79413	STEPHENVILLE	TX	76401
Phone	(806) 799-1948	Fax	(806) 785-7587	PHONE:	(254) 968-4004
				FAX:	(254) 965-8653
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	10/01/2018	
County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID:	007443	Owner Information		
HOFFMAN HOUSE			WESTVIEW RESIDENTIAL SERVICES INC		
3412 85TH ST			3104 43RD		
LUBBOCK	TX	79423	LUBBOCK	TX	79413
Phone	(806) 795-9632	Fax	(806) 771-7609	PHONE:	(806) 781-1898
				FAX:	(806) 785-4684
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	09/01/2018	
County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID:	003872	Owner Information		
JUNEAU COMMUNITY HOME			EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP		
2502 JUNEAU AVE			9901 LINN STATION ROAD		
LUBBOCK	TX	79407	LOUISVILLE	KY	40223-3808
Phone	(806) 894-4902	Fax	(806) 894-9605	PHONE:	(502) 394-2100
				FAX:	(502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	01/01/2017	
County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID:	003807	Owner Information		
LUBBOCK REGIONAL M H M R 2 EAST			LUBBOCK REGIONAL M H M R CENTER		
8405 19TH STREET			1210 TEXAS AVENUE		
LUBBOCK	TX	79407	LUBBOCK	TX	79407
Phone	(806) 792-1359	Fax	(806) 741-0913	PHONE:	
				FAX:	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	GOVERNMENT BASED
			License Exp Dt:		
County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID:	003697	Owner Information		
LUBBOCK REGIONAL MHMR 5			LUBBOCK REGIONAL M H M R CENTER		
3105 29TH ST			1210 TEXAS AVENUE		
LUBBOCK	TX	79410	LUBBOCK	TX	79407
Phone	(806) 795-0523	Fax	(806) 766-0340	PHONE:	
				FAX:	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	GOVERNMENT BASED
			License Exp Dt:		
County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID:	003704	Owner Information		
LUBBOCK REGIONAL MHMR CENTER 1 30TH ST			LUBBOCK REGIONAL M H M R CENTER		
1711 30TH ST			1210 TEXAS AVENUE		
LUBBOCK	TX	79408	LUBBOCK	TX	79407
Phone	(806) 799-1998	Fax		PHONE:	
				FAX:	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	GOVERNMENT BASED
			License Exp Dt:		

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:		Facility ID:	007654	Owner Information	
LUBBOCK REGIONAL MHMR CENTER 3 CENTRAL				LUBBOCK REGIONAL M H M R CENTER	
6302 34TH ST				1210 TEXAS AVENUE	
LUBBOCK		TX	79407	LUBBOCK TX 79407	
Phone	(806) 791-5408	Fax		PHONE:	FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	GOVERNMENT BASED
				License Exp Dt:	
County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:		Facility ID:	007107	Owner Information	
LUBBOCK STATE SUPPORTED LIVING CENTER				DADS	
3401 N UNIVERSITY AVE				PO BOX 12668	
LUBBOCK		TX	79415	AUSTIN TX 78711	
Phone	(806) 763-7041	Fax		PHONE:	(512) 454-3761
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	436
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	STATE SCHOOL/STATE CENTER
				License Exp Dt:	
County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:		Facility ID:	003917	Owner Information	
MOSAIC				MOSAIC	
3425 GRINNELL				428 ST ANDREWS DR	
LUBBOCK		TX	79415	ALLEN TX 75002	
Phone	(806) 794-9334	Fax	(806) 794-9337	PHONE:	(469) 675-1561
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	01/01/2017
County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:		Facility ID:	007591	Owner Information	
MOSAIC				MOSAIC	
3419 54TH ST				428 ST ANDREWS DR	
LUBBOCK		TX	79412	ALLEN TX 75002	
Phone	(806) 794-9334	Fax	(806) 794-9337	PHONE:	(469) 675-1561
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	01/01/2017
County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:		Facility ID:	003951	Owner Information	
MOSAIC				MOSAIC	
5814 6TH ST				428 ST ANDREWS DR	
LUBBOCK		TX	79416	ALLEN TX 75002	
Phone	(806) 794-9334	Fax	(806) 794-9337	PHONE:	(469) 675-1561
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	01/01/2017
County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:		Facility ID:	007491	Owner Information	
ANNADALE MANOR INC.				ANNADALE MANOR INC.	
10702 COUNTY RD 1300				7614 BAYLOR	
WOLFFORTH		TX	79382	LUBBOCK TX 79416	
Phone	(806) 866-9186	Fax	(806) 924-7773	PHONE:	(806) 632-6588
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	04/01/2018

County	MADISON		Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007557		<u>Owner Information</u>			
MOSAIC					MOSAIC			
103 E VISER					428 ST ANDREWS DR			
MADISONVILLE		TX	77864		ALLEN TX 75002			
Phone	(979) 823-7622		Fax	(979) 775-5733		PHONE:	(469) 675-1561 FAX: (469) 675-1562	
TOTAL Lic Capacity:	0		TITLE 18:	0		ICF/IID:	6	
Cert Alzh Capacity:	0		TITLE19:	0		PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds:	0		TITLE 18/19:	0		License Exp Dt:	01/01/2017	
County	MCLENNAN		Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	003826		<u>Owner Information</u>			
NORTHWEST WACO LIVING RESIDENCE					HEART OF TEXAS REGIONAL MHMR CENTER			
2323 N 39TH ST					110 S 12TH ST			
WACO		TX	76708		WACO TX 76703			
Phone	(254) 752-7230		Fax	(254) 752-1931		PHONE:	FAX:	
TOTAL Lic Capacity:	0		TITLE 18:	0		ICF/IID:	8	
Cert Alzh Capacity:	0		TITLE19:	0		PROGRAM TYPE:	ICF/IID SERVICE TYPE GOVERNMENT BASED	
PRIVATE Beds:	0		TITLE 18/19:	0		License Exp Dt:		
County	MCLENNAN		Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007628		<u>Owner Information</u>			
WEST WARD GROUP HOME					HEART OF TEXAS REGIONAL MHMR CENTER			
108 WEST WARD					110 S 12TH ST			
WACO		TX	76706		WACO TX 76703			
Phone	(254) 662-6144		Fax			PHONE:	FAX:	
TOTAL Lic Capacity:	0		TITLE 18:	0		ICF/IID:	6	
Cert Alzh Capacity:	0		TITLE19:	0		PROGRAM TYPE:	ICF/IID SERVICE TYPE GOVERNMENT BASED	
PRIVATE Beds:	0		TITLE 18/19:	0		License Exp Dt:		
County	MEDINA		Reg Svcs:	TEAM ICF-IID		Region	08 - SAN ANTONIO	
Facility Information:		Facility ID:	007327		<u>Owner Information</u>			
28TH STREET COMMUNITY HOME					EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
1506 28TH ST					9901 LINN STATION ROAD			
HONDO		TX	78861-3208		LOUISVILLE KY 40223-3808			
Phone	(830) 741-4624		Fax			PHONE:	(502) 394-2100 FAX: (502) 394-2285	
TOTAL Lic Capacity:	0		TITLE 18:	0		ICF/IID:	6	
Cert Alzh Capacity:	0		TITLE19:	0		PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds:	0		TITLE 18/19:	0		License Exp Dt:	01/01/2019	
County	MIDLAND		Reg Svcs:	ICF/IID		Region	09 - ABILENE	
Facility Information:		Facility ID:	003959		<u>Owner Information</u>			
BARNEY GREATHOUSE MEMORIAL HOME					MARC INC			
3005 W GOLFCOURSE RD					2701 NORTH A ST			
MIDLAND		TX	79701		MIDLAND TX 79705			
Phone	(432) 695-9028		Fax	(432) 695-9909		PHONE:	(432) 695-9901 FAX:	
TOTAL Lic Capacity:	0		TITLE 18:	0		ICF/IID:	6	
Cert Alzh Capacity:	0		TITLE19:	0		PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds:	0		TITLE 18/19:	0		License Exp Dt:	01/23/2018	
County	MIDLAND		Reg Svcs:	ICF/IID		Region	09 - ABILENE	
Facility Information:		Facility ID:	007279		<u>Owner Information</u>			
CAMARIE PLACE					MARC INC			
2302 CAMARIE					2701 NORTH A ST			
MIDLAND		TX	79705		MIDLAND TX 79705			
Phone	(432) 695-9919		Fax	(432) 695-9909		PHONE:	(432) 695-9901 FAX:	
TOTAL Lic Capacity:	0		TITLE 18:	0		ICF/IID:	6	
Cert Alzh Capacity:	0		TITLE19:	0		PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds:	0		TITLE 18/19:	0		License Exp Dt:	06/25/2018	



County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID:	003984	<u>Owner Information</u>		
LINDORA WAY			MARC INC		
2000 LINDORA WAY			2701 NORTH A ST		
MIDLAND	TX	79707	MIDLAND	TX	79705
Phone	(432) 695-9035	Fax	(432) 695-9909	PHONE:	(432) 695-9901
				FAX:	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	12/13/2017
County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID:	003819	<u>Owner Information</u>		
MARCWOOD ONE			MARC INC		
2801 NORTH A ST			2701 NORTH A ST		
MIDLAND	TX	79705	MIDLAND	TX	79705
Phone	(432) 695-9901	Fax	(432) 695-9909	PHONE:	(432) 695-9901
				FAX:	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	13
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	11/01/2017
County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID:	003787	<u>Owner Information</u>		
MARCWOOD TWO			MARC INC		
2901 NORTH A ST			2701 NORTH A ST		
MIDLAND	TX	79705	MIDLAND	TX	79705
Phone	(432) 695-9901	Fax	(432) 695-9909	PHONE:	(432) 695-9901
				FAX:	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	13
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	11/01/2017
County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID:	007243	<u>Owner Information</u>		
ROCK HOUSE MICHIGAN			ROCK HOUSE SUPPORT SERVICES INC		
811 W MICHIGAN			2252 LINGLEVILLE ROAD HWY 8		
MIDLAND	TX	79701	STEPHENVILLE	TX	76401
Phone	(432) 682-1424	Fax	(432) 685-6167	PHONE:	(254) 968-4004
				FAX:	(254) 965-8653
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	10/01/2016
County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID:	007618	<u>Owner Information</u>		
ROCK HOUSE SPENCE			ROCK HOUSE SUPPORT SERVICES INC		
4403 SPENCE			2252 LINGLEVILLE ROAD HWY 8		
MIDLAND	TX	79707	STEPHENVILLE	TX	76401
Phone	(432) 699-4128	Fax	(432) 682-6167	PHONE:	(254) 968-4004
				FAX:	(254) 965-8653
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	10/01/2018
County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID:	003642	<u>Owner Information</u>		
ROCK HOUSE TRAIL			ROCK HOUSE SUPPORT SERVICES INC		
2806 ARROWHEAD TRAILS			2252 LINGLEVILLE ROAD HWY 8		
MIDLAND	TX	79705	STEPHENVILLE	TX	76401
Phone	(432) 694-8351	Fax	(432) 682-6167	PHONE:	(254) 968-4004
				FAX:	(254) 965-8653
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	10/01/2018

County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003657	Owner Information			
ROCK HOUSE TREVINO		ROCK HOUSE SUPPORT SERVICES INC			
4314 TREVINO		2252 LINGLEVILLE ROAD HWY 8			
MIDLAND	TX 79705	STEPHENVILLE TX 76401			
Phone (432) 685-5057	Fax (432) 682-6167	PHONE: (254) 968-4004 FAX: (254) 965-8653			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 10/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				
County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003985	Owner Information			
SAINT ANDREWS		MARC INC			
4512 SAINT ANDREWS		2701 NORTH A ST			
MIDLAND	TX 79707	MIDLAND TX 79705			
Phone (432) 695-9920	Fax (432) 695-9909	PHONE: (432) 695-9901 FAX:			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 12/13/2017			
PRIVATE Beds: 0	TITLE 18/19: 0				
County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 007612	Owner Information			
WEST ROCK		ROCK HOUSE SUPPORT SERVICES INC			
708 DEVONIAN		2252 LINGLEVILLE ROAD HWY 8			
MIDLAND	TX 79703	STEPHENVILLE TX 76401			
Phone (432) 697-8320	Fax (432) 682-6167	PHONE: (254) 968-4004 FAX: (254) 965-8653			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 10/01/2016			
PRIVATE Beds: 0	TITLE 18/19: 0				
County	MILLS	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007625	Owner Information			
JOHNSON HOMES		TDAF LLC			
210 CR 112		PO BOX 27			
GOLDTHWAITE	TX 76844	GOLDTHWAITE TX 76844			
Phone (325) 985-3544	Fax (325) 985-3575	PHONE: (325) 985-3544 FAX: (325) 985-3575			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/10/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				
County	MONTGOMERY	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003882	Owner Information			
NORTH THOMPSON HOUSE		TRI COUNTY MHMR SERVICES			
2223 N THOMPSON ST		PO BOX 3067			
CONROE	TX 77303	CONROE TX 77305			
Phone (713) 760-3660	Fax	ICF/IID: 6	PHONE: FAX:		
TOTAL Lic Capacity: 0	TITLE 18: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED			
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt:			
PRIVATE Beds: 0	TITLE 18/19: 0				
County	MONTGOMERY	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003905	Owner Information			
PATRICIA STREET HOUSE		TRI COUNTY MHMR SERVICES			
104 PATRICIA ST		PO BOX 3067			
CONROE	TX 77301	CONROE TX 77305			
Phone (409) 760-4074	Fax (409) 756-8331	ICF/IID: 6	PHONE: FAX:		
TOTAL Lic Capacity: 0	TITLE 18: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED			
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt:			
PRIVATE Beds: 0	TITLE 18/19: 0				



County	NAVARRO		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
<b>Facility Information:</b>	<b>Facility ID:</b>	007445				<b>Owner Information</b>		
DONAHU HOUSE						EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP		
1516 W 5TH AVE						9901 LINN STATION ROAD		
CORSICANA	<b>TX</b>	75110-4207				LOUISVILLE	KY	40223-3808
<b>Phone</b>	(903) 872-9568	<b>Fax</b>				<b>PHONE:</b>	(502) 394-2100	<b>FAX:</b> (502) 394-2285
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	01/01/2019	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	NAVARRO		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
<b>Facility Information:</b>	<b>Facility ID:</b>	007217				<b>Owner Information</b>		
EDWARDS COMMUNITY HOME						EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP		
701 W 4TH AVE						9901 LINN STATION ROAD		
CORSICANA	<b>TX</b>	75110-4551				LOUISVILLE	KY	40223-3808
<b>Phone</b>	(903) 872-8006	<b>Fax</b>				<b>PHONE:</b>	(502) 394-2100	<b>FAX:</b> (502) 394-2285
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	01/01/2017	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	NAVARRO		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
<b>Facility Information:</b>	<b>Facility ID:</b>	007335				<b>Owner Information</b>		
HARMONY HOUSE I V						HARMONY LIVING CENTERS INC		
720 SE CR 0025						112 S WARD DR		
CORSICANA	<b>TX</b>	75110				LONGVIEW	TX	75604
<b>Phone</b>	(903) 872-2423	<b>Fax</b>	(903) 295-7394	<b>ICF/IID:</b>	6	<b>PHONE:</b>	(903) 295-7391	<b>FAX:</b> (903) 295-7394
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0			<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	08/09/2018	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	NAVARRO		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
<b>Facility Information:</b>	<b>Facility ID:</b>	007315				<b>Owner Information</b>		
HARMONY HOUSE III						HARMONY LIVING CENTERS INC		
509 LAKEWOOD						112 S WARD DR		
CORSICANA	<b>TX</b>	75110				LONGVIEW	TX	75604
<b>Phone</b>	(903) 872-1234	<b>Fax</b>	(903) 872-3864	<b>ICF/IID:</b>	6	<b>PHONE:</b>	(903) 295-7391	<b>FAX:</b> (903) 295-7394
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0			<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	09/11/2017	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	NAVARRO		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
<b>Facility Information:</b>	<b>Facility ID:</b>	007454				<b>Owner Information</b>		
HARMONY HOUSE V I						HARMONY LIVING CENTERS INC		
430 MADISON AVE						112 S WARD DR		
CORSICANA	<b>TX</b>	75110				LONGVIEW	TX	75604
<b>Phone</b>	(903) 874-2661	<b>Fax</b>	(903) 295-7394	<b>ICF/IID:</b>	6	<b>PHONE:</b>	(903) 295-7391	<b>FAX:</b> (903) 295-7394
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0			<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	08/25/2018	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	NAVARRO		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
<b>Facility Information:</b>	<b>Facility ID:</b>	007506				<b>Owner Information</b>		
OAKLAWN HOUSE						CEN-TEX ASSOCIATION FOR RETARDED CHILDREN		
1102 OAKLAWN						PO DRAWER 750		
CORSICANA	<b>TX</b>	75110				MEXIA	TX	76667
<b>Phone</b>	(903) 872-6083	<b>Fax</b>	(903) 872-0895	<b>ICF/IID:</b>	6	<b>PHONE:</b>	(254) 562-2891	<b>FAX:</b> (254) 562-7656
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0			<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	02/03/2018	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					

County	NAVARRO		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
Facility Information:		Facility ID:	007577		<u>Owner Information</u>			
SUNSET ACRES HOUSE					CEN-TEX ASSOCIATION FOR RETARDED CHILDREN			
5835 NW COUNTY RD 2091					PO DRAWER 750			
CORSICANA		TX	75110		MEXIA TX		76667	
Phone	(903) 872-6138	Fax	(903) 872-0895		PHONE:	(254) 562-2891	FAX: (254) 562-7656	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID	
Cert Alzh Capacity:	0	TITLE19:	0			SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	12/14/2017	
County	NAVARRO		Reg Svcs:	IID TEAM		Region	03 - ARLINGTON	
Facility Information:		Facility ID:	007519		<u>Owner Information</u>			
TAMMY HOUSE					CEN-TEX ASSOCIATION FOR RETARDED CHILDREN			
1312 TAMMY					PO DRAWER 750			
CORSICANA		TX	75110		MEXIA TX		76667	
Phone	(903) 872-6086	Fax	(903) 872-0895		PHONE:	(254) 562-2891	FAX: (254) 562-7656	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID	
Cert Alzh Capacity:	0	TITLE19:	0			SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	03/23/2018	
County	NEWTON		Reg Svcs:	REGION 5 ICF/IID		Region	05 - BEAUMONT	
Facility Information:		Facility ID:	003996		<u>Owner Information</u>			
NEWTON GROUP HOME					THE BURKE CENTER			
700 MCMAHON					4101 SOUTH MEDFORD DR			
NEWTON		TX	75966		LUFKIN TX		75901	
Phone	(409) 379-3335	Fax			PHONE:		FAX:	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID	
Cert Alzh Capacity:	0	TITLE19:	0			SERVICE TYPE	GOVERNMENT BASED	
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:		
County	NOLAN		Reg Svcs:	ICF/IID		Region	02 - ABILENE	
Facility Information:		Facility ID:	007225		<u>Owner Information</u>			
HACKBERRY HOUSE					LIVING RESOURCES LLC			
1916 LAKEVIEW					3125 S 27TH ST			
SWEETWATER		TX	79556		ABILENE TX		79605	
Phone	(325) 235-2568	Fax	(325) 235-1364		PHONE:	(325) 695-2112	FAX: (325) 794-0023	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID	
Cert Alzh Capacity:	0	TITLE19:	0			SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	01/23/2018	
County	NOLAN		Reg Svcs:	ICF/IID		Region	02 - ABILENE	
Facility Information:		Facility ID:	007657		<u>Owner Information</u>			
WALNUT CREEK HOME					LIVING RESOURCES LLC			
301 W AVE D					3125 S 27TH ST			
SWEETWATER		TX	79556		ABILENE TX		79605	
Phone	(325) 235-2568	Fax	(325) 235-1364		PHONE:	(325) 695-2112	FAX: (325) 794-0023	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	13	PROGRAM TYPE:	ICF/IID	
Cert Alzh Capacity:	0	TITLE19:	0			SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	01/01/2017	
County	NUECES		Reg Svcs:	CORPUS CHRISTI 61		Region	11 - CORPUS CHRISTI	
Facility Information:		Facility ID:	007511		<u>Owner Information</u>			
BROCKHAMPTON HOUSE					LMS CONCEPTS INC			
6102 BROCKHAMPTON					PO BOX 270755			
CORPUS CHRISTI		TX	78414		CORPUS CHRISTI TX		78427-0755	
Phone	(361) 992-7763	Fax	(361) 852-2181		PHONE:	(361) 854-9332	FAX: (361) 852-2181	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID	
Cert Alzh Capacity:	0	TITLE19:	0			SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	02/12/2018	

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
<b>Facility Information:</b>		<b>Facility ID:</b>	007124	<b>Owner Information</b>	
CASTLE RIVER				DADS	
4013 CASTLE RIDGE				PO BOX 12668	
CORPUS CHRISTI		<b>TX</b>	78410	AUSTIN TX 78711	
<b>Phone</b>	(361) 241-9526	<b>Fax</b>		<b>PHONE:</b>	(512) 454-3761
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	5
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	STATE SCHOOL/STATE CENTER
				<b>License Exp Dt:</b>	

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
<b>Facility Information:</b>		<b>Facility ID:</b>	007111	<b>Owner Information</b>	
CORPUS CHRISTI STATE SUPPORTED LIVING CENTER				DADS	
902 AIRPORT RD				PO BOX 12668	
CORPUS CHRISTI		<b>TX</b>	78405	AUSTIN TX 78711	
<b>Phone</b>	(361) 888-5301	<b>Fax</b>	(361) 844-7621	<b>PHONE:</b>	(512) 454-3761
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	432
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	STATE SCHOOL/STATE CENTER
				<b>License Exp Dt:</b>	

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
<b>Facility Information:</b>		<b>Facility ID:</b>	007581	<b>Owner Information</b>	
CROSSGATE HOUSE				ANCHOR HABILITATION SERVICES LLC	
5502 CROSSGATE N				18443 REDLAND RD	
CORPUS CHRISTI		<b>TX</b>	78413	SAN ANTONIO TX 78259-3571	
<b>Phone</b>	(361) 657-0247	<b>Fax</b>	(361) 657-0250	<b>PHONE:</b>	(361) 657-0247
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	09/01/2018

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
<b>Facility Information:</b>		<b>Facility ID:</b>	003858	<b>Owner Information</b>	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
4038 KILLARMET				9901 LINN STATION RD	
CORPUS CHRISTI		<b>TX</b>	78413	LOUISVILLE KY 40223	
<b>Phone</b>	(361) 852-3928	<b>Fax</b>		<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	08/01/2017

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
<b>Facility Information:</b>		<b>Facility ID:</b>	003664	<b>Owner Information</b>	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
9230 EVENING STAR				9901 LINN STATION RD	
CORPUS CHRISTI		<b>TX</b>	78410	LOUISVILLE KY 40223	
<b>Phone</b>	(361) 241-0365	<b>Fax</b>		<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	08/01/2017

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
<b>Facility Information:</b>		<b>Facility ID:</b>	003659	<b>Owner Information</b>	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
5502 BOWIE				9901 LINN STATION RD	
CORPUS CHRISTI		<b>TX</b>	78415-1965	LOUISVILLE KY 40223	
<b>Phone</b>	(361) 854-7333	<b>Fax</b>		<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	08/27/2017

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
<b>Facility Information:</b>		<b>Facility ID:</b> 007258	<b>Owner Information</b>		
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		
4913 EIDER			9901 LINN STATION RD		
CORPUS CHRISTI		TX 78413	LOUISVILLE KY 40223		
<b>Phone</b>	(361) 994-9103	<b>Fax</b>	<b>PHONE:</b>	(502) 394-2100	<b>FAX:</b> (502) 394-2285
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b> 0			
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b>	08/01/2017	
County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
<b>Facility Information:</b>		<b>Facility ID:</b> 007265	<b>Owner Information</b>		
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		
409 SHERIDAN			9901 LINN STATION RD		
CORPUS CHRISTI		TX 78412	LOUISVILLE KY 40223		
<b>Phone</b>	(361) 993-2950	<b>Fax</b>	<b>PHONE:</b>	(502) 394-2100	<b>FAX:</b> (502) 394-2285
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b> 0			
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b>	08/01/2017	
County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
<b>Facility Information:</b>		<b>Facility ID:</b> 003660	<b>Owner Information</b>		
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		
5310 WENTWORTH			9901 LINN STATION RD		
CORPUS CHRISTI		TX 78413	LOUISVILLE KY 40223		
<b>Phone</b>	(361) 906-1005	<b>Fax</b>	<b>PHONE:</b>	(502) 394-2100	<b>FAX:</b> (502) 394-2285
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b> 0			
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b>	08/01/2017	
County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
<b>Facility Information:</b>		<b>Facility ID:</b> 007363	<b>Owner Information</b>		
EDUCARE COMMUNITY LIVING CORPORATION-TEXAS			EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		
9329 MOON LIGHT DR			9901 LINN STATION RD		
CORPUS CHRISTI		TX 78409	LOUISVILLE KY 40223		
<b>Phone</b>	(361) 242-1641	<b>Fax</b>	<b>PHONE:</b>	(502) 394-2100	<b>FAX:</b> (502) 394-2285
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b> 0			
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b>	09/01/2017	
County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
<b>Facility Information:</b>		<b>Facility ID:</b> 007433	<b>Owner Information</b>		
EDUCARE COMMUNITY LIVING CORPORATION-TEXAS			EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		
4053 MOUNTAIN VIEW			9901 LINN STATION RD		
CORPUS CHRISTI		TX 78410	LOUISVILLE KY 40223		
<b>Phone</b>	(361) 241-9921	<b>Fax</b>	<b>PHONE:</b>	(502) 394-2100	<b>FAX:</b> (502) 394-2285
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b> 0			
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b>	09/01/2017	
County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
<b>Facility Information:</b>		<b>Facility ID:</b> 105083	<b>Owner Information</b>		
NELON			EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		
11730 NELON			9901 LINN STATION RD		
CORPUS CHRISTI		TX 78414	LOUISVILLE KY 40223		
<b>Phone</b>	(361) 241-7077	<b>Fax</b> (361) 854-7578	<b>PHONE:</b>	(502) 394-2100	<b>FAX:</b> (502) 394-2285
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b> 0			
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b>	08/01/2017	

County	NUECES		Reg Svcs:		CORPUS CHRISTI 61		Region		11 - CORPUS CHRISTI	
Facility Information:			Facility ID:		007123		Owner Information			
RIVER FOREST							DADS			
5021 CALALLEN DRIVE							PO BOX 12668			
CORPUS CHRISTI			TX	78410			AUSTIN		TX	78711
Phone	(361) 241-5312		Fax				PHONE:		(512) 454-3761	
TOTAL Lic Capacity:			0	TITLE 18:		0	ICF/IID:		5	
Cert Alzh Capacity:			0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	
PRIVATE Beds:			0	TITLE 18/19:		0	License Exp Dt:			
PROGRAM TYPE:			ICF/IID				SERVICE TYPE		STATE SCHOOL/STATE CENTER	
County	NUECES		Reg Svcs:		CORPUS CHRISTI 61		Region		11 - CORPUS CHRISTI	
Facility Information:			Facility ID:		007391		Owner Information			
WINTERPARK HOUSE							ANCHOR HABILITATION SERVICES LLC			
7022 WINTERPARK							18443 REDLAND RD			
CORPUS CHRISTI			TX	78413			SAN ANTONIO		TX	78259-3571
Phone	(361) 657-0247		Fax		(361) 657-0250		PHONE:		(361) 657-0247	
TOTAL Lic Capacity:			0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:			0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	
PRIVATE Beds:			0	TITLE 18/19:		0	License Exp Dt:		09/01/2018	
SERVICE TYPE			PRIVATELY OWNED							
County	ORANGE		Reg Svcs:		REGION 5 ICF/IID		Region		05 - BEAUMONT	
Facility Information:			Facility ID:		003871		Owner Information			
CYPRESS STREET GROUP HOME							EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
1302 W. CYPRESS AVENUE							9901 LINN STATION RD			
ORANGE			TX	77630			LOUISVILLE		KY	40223
Phone	(409) 882-9442		Fax		(409) 882-9900		PHONE:		(502) 394-2100	
TOTAL Lic Capacity:			0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:			0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	
PRIVATE Beds:			0	TITLE 18/19:		0	License Exp Dt:		08/01/2017	
SERVICE TYPE			PRIVATELY OWNED							
County	ORANGE		Reg Svcs:		REGION 5 ICF/IID		Region		05 - BEAUMONT	
Facility Information:			Facility ID:		007482		Owner Information			
WESTMONT COMMUNITY HOME							DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC			
2204 N 24TH STREET							4115 GALVESTON ROAD			
ORANGE			TX	77630			HOUSTON		TX	77017
Phone	(409) 832-4112		Fax		(409) 832-6974		PHONE:		(713) 475-2228	
TOTAL Lic Capacity:			0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:			0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	
PRIVATE Beds:			0	TITLE 18/19:		0	License Exp Dt:		01/01/2019	
SERVICE TYPE			PRIVATELY OWNED							
County	PALO PINTO		Reg Svcs:		IID TEAM		Region		03 - ARLINGTON	
Facility Information:			Facility ID:		003946		Owner Information			
NORTHWEST 23RD STREET							PECAN VALLEY MHMR REGION			
202 NW 23RD ST							PO BOX 973			
MINERAL WELLS			TX	76067			STEPHENVILLE		TX	76401
Phone	(817) 328-1508		Fax		(817) 965-7806		PHONE:			
TOTAL Lic Capacity:			0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:			0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	
PRIVATE Beds:			0	TITLE 18/19:		0	License Exp Dt:			
SERVICE TYPE			GOVERNMENT BASED							
County	PARKER		Reg Svcs:		IID TEAM		Region		03 - ARLINGTON	
Facility Information:			Facility ID:		007223		Owner Information			
ELM COURT							MAINSTREAM HABILITATION SERVICES OF TEXAS INC			
928 ELM COURT							301 COMMERCE			
AZLE			TX	76020			AZLE		TX	76020
Phone	(817) 270-2747		Fax		(817) 270-1477		PHONE:		(817) 270-2747	
TOTAL Lic Capacity:			0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:			0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	
PRIVATE Beds:			0	TITLE 18/19:		0	License Exp Dt:		07/11/2017	
SERVICE TYPE			PRIVATELY OWNED							



County	PARKER			Reg Svcs:	IID TEAM		Region	03 - ARLINGTON		
Facility Information:		Facility ID:	007209		<u>Owner Information</u>					
TANGLEWOOD					MAINSTREAM HABILITATION SERVICES OF TEXAS INC					
1613 TANGLEWOOD					301 COMMERCE					
AZLE		TX	76020		AZLE		TX	76020		
Phone	(817) 221-4945		Fax	(817) 270-1477		PHONE:	(817) 270-2747		FAX:	(817) 270-1477
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:	ICF/IID
Cert Alzh Capacity:		0	TITLE19:		0	SERVICE TYPE		PRIVATELY OWNED		
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		07/11/2017		
County	PARKER			Reg Svcs:	IID TEAM		Region	03 - ARLINGTON		
Facility Information:		Facility ID:	003610		<u>Owner Information</u>					
MILL STREET					PECAN VALLEY MHMR REGION					
1212 S MILL ST					PO BOX 973					
WEATHERFORD		TX	76086		STEPHENVILLE		TX	76401		
Phone	(817) 598-0559		Fax	(817) 599-7636		PHONE:	(817) 599-7636		FAX:	
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:	ICF/IID
Cert Alzh Capacity:		0	TITLE19:		0	SERVICE TYPE		GOVERNMENT BASED		
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:				
County	POLK			Reg Svcs:	REGION 5 ICF/IID		Region	05 - BEAUMONT		
Facility Information:		Facility ID:	007537		<u>Owner Information</u>					
NEW DAY HOUSE					NEW DAY INTERMEDIATE CARE LLC					
4530 HWY 190E					11722 GRAY FOREST TRAIL					
LIVINGSTON		TX	77351		TOMBALL		TX	77377		
Phone	(936) 327-7075		Fax	(936) 327-5143		PHONE:	(832) 860-8417		FAX:	(832) 559-8552
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:	ICF/IID
Cert Alzh Capacity:		0	TITLE19:		0	SERVICE TYPE		PRIVATELY OWNED		
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		09/01/2017		
County	RANDALL			Reg Svcs:	HIGH PLAINS ICF/MR		Region	01 - LUBBOCK		
Facility Information:		Facility ID:	007613		<u>Owner Information</u>					
ANDOVER					ADVO COMPANIES INC					
7006 ANDOVER					PO BOX 51744					
AMARILLO		TX	79109		AMARILLO		TX	79159		
Phone	(806) 342-0600		Fax	(806) 342-0900		PHONE:	(806) 342-0600		FAX:	(806) 342-0900
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:	ICF/IID
Cert Alzh Capacity:		0	TITLE19:		0	SERVICE TYPE		PRIVATELY OWNED		
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		06/29/2016		
County	RANDALL			Reg Svcs:	HIGH PLAINS ICF/MR		Region	01 - LUBBOCK		
Facility Information:		Facility ID:	007311		<u>Owner Information</u>					
AVONDALE					ADVO COMPANIES INC					
6911 VISION					PO BOX 51744					
AMARILLO		TX	79119		AMARILLO		TX	79159		
Phone	(806) 342-0600		Fax	(806) 342-0900		PHONE:	(806) 342-0600		FAX:	(806) 342-0900
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:	ICF/IID
Cert Alzh Capacity:		0	TITLE19:		0	SERVICE TYPE		PRIVATELY OWNED		
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/30/2018		
County	RANDALL			Reg Svcs:	HIGH PLAINS ICF/MR		Region	01 - LUBBOCK		
Facility Information:		Facility ID:	007619		<u>Owner Information</u>					
EL PASO					ADVO COMPANIES INC					
8511 EL PASO DR					PO BOX 51744					
AMARILLO		TX	79118		AMARILLO		TX	79159		
Phone	(806) 342-0600		Fax	(806) 342-0900		PHONE:	(806) 342-0600		FAX:	(806) 342-0900
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	PROGRAM TYPE:	ICF/IID
Cert Alzh Capacity:		0	TITLE19:		0	SERVICE TYPE		PRIVATELY OWNED		
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		08/09/2018		

County	RANDALL			Reg Svcs:	HIGH PLAINS ICF/MR			Region	01 - LUBBOCK		
Facility Information:		Facility ID:		007273		<u>Owner Information</u>					
HAMPTON						ADVO COMPANIES INC					
6004 HAMPTON						PO BOX 51744					
AMARILLO		TX	79109			AMARILLO		TX	79159		
Phone	(806) 342-0600		Fax	(806) 342-0900		PHONE:		(806) 342-0600		FAX:	(806) 342-0900
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE		PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		06/03/2018			
County	RANDALL			Reg Svcs:	HIGH PLAINS ICF/MR			Region	01 - LUBBOCK		
Facility Information:		Facility ID:		007271		<u>Owner Information</u>					
MARY DELL						ADVO COMPANIES INC					
5718 MARY DELL						PO BOX 51744					
AMARILLO		TX	79109			AMARILLO		TX	79159		
Phone	(806) 342-0600		Fax	(806) 342-0900		PHONE:		(806) 342-0600		FAX:	(806) 342-0900
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE		PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		06/23/2018			
County	RANDALL			Reg Svcs:	HIGH PLAINS ICF/MR			Region	01 - LUBBOCK		
Facility Information:		Facility ID:		007490		<u>Owner Information</u>					
SIMPSON						ADVO COMPANIES INC					
7800 SIMPSON						PO BOX 51744					
AMARILLO		TX	79121			AMARILLO		TX	79159		
Phone	(806) 342-0600		Fax	(806) 342-0900		PHONE:		(806) 342-0600		FAX:	(806) 342-0900
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE		PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		12/11/2017			
County	RANDALL			Reg Svcs:	HIGH PLAINS ICF/MR			Region	01 - LUBBOCK		
Facility Information:		Facility ID:		007518		<u>Owner Information</u>					
IDLEWOOD COMMUNITY HOME						EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP					
4 IDLEWOOD						9901 LINN STATION ROAD					
CANYON		TX	79015			LOUISVILLE		KY	40223-3808		
Phone	(806) 894-4902		Fax	(806) 894-9605		PHONE:		(502) 394-2100		FAX:	(502) 394-2285
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE		PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/01/2019			
County	RUSK			Reg Svcs:	ICF/IID TEAM			Region	04 - TYLER		
Facility Information:		Facility ID:		007539		<u>Owner Information</u>					
CROSBY COMMUNITY HOME						CROSBY COMMUNITY HOME INC					
102 CROSBY DR						112 S WARD DR					
HENDERSON		TX	75652			LONGVIEW		TX	75604		
Phone	(903) 655-0118		Fax	(903) 295-7394		PHONE:		(903) 295-7391		FAX:	(903) 295-7394
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE		PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		06/08/2018			
County	RUSK			Reg Svcs:	ICF/IID TEAM			Region	04 - TYLER		
Facility Information:		Facility ID:		007331		<u>Owner Information</u>					
PETERSON COMMUNITY HOME						S S L & H INC					
1522 PETERSON						112 S WARD					
HENDERSON		TX	75652			LONGVIEW		TX	75604		
Phone	(903) 657-3495		Fax	(903) 295-7394		PHONE:		(903) 295-7391		FAX:	(903) 295-7394
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6			
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE		PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		11/08/2017			

County	RUSK			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER	
Facility Information:		Facility ID:	007257		<u>Owner Information</u>				
TRUMAN DRIVE COMMUNITY HOME					D & S RESIDENTIAL SERVICES LP				
103 TRUMAN					8911 N CAPITAL OF TX HWY				
HENDERSON		TX	75652				,BLDG 1 STE 1300		
Phone	(903) 657-8923	Fax	(903) 327-5355				78759		
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		12/01/2017	
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:		12/01/2017		PHONE:		(512) 327-2325		FAX: (512) 327-5355	
PROGRAM TYPE:		ICF/IID		SERVICE TYPE		PRIVATELY OWNED			
License Exp Dt:									

County	SMITH			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER		
Facility Information:		Facility ID:		007372		<u>Owner Information</u>				
BRECKENRIDGE VILLAGE OF TYLER - BLUEBONNET HOUSE						BAPTIST CARE FACILITIES FOR PERSONS WITH MENTAL DISABILITIES INC				
15062 CR 1145						15062 CR 1145				
TYLER		TX	75704		TYLER		TX	75704		
Phone	(903) 596-8100		Fax	(903) 596-8104		PHONE:	(903) 596-8100		FAX:	(903) 596-8104
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		11/01/2017		
County	SMITH			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER		
Facility Information:		Facility ID:		007213		<u>Owner Information</u>				
BRECKENRIDGE VILLAGE OF TYLER - MAGNOLIA HOUSE						BAPTIST CARE FACILITIES FOR PERSONS WITH MENTAL DISABILITIES INC				
15062 CR 1145						15062 CR 1145				
TYLER		TX	75704		TYLER		TX	75704		
Phone	(903) 596-8100		Fax	(903) 596-8104		PHONE:	(903) 596-8100		FAX:	(903) 596-8104
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		02/01/2017		
County	SMITH			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER		
Facility Information:		Facility ID:		007620		<u>Owner Information</u>				
BRECKENRIDGE VILLAGE OF TYLER - MALLARD HOUSE						BAPTIST CARE FACILITIES FOR PERSONS WITH MENTAL DISABILITIES INC				
15062 CR 1145						15062 CR 1145				
TYLER		TX	75704		TYLER		TX	75704		
Phone	(903) 596-8100		Fax	(903) 596-8104		PHONE:	(903) 596-8100		FAX:	(903) 596-8104
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		11/01/2017		
County	SMITH			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER		
Facility Information:		Facility ID:		106432		<u>Owner Information</u>				
BRECKENRIDGE VILLAGE OF TYLER- ROSE HOUSE						BAPTIST CARE FACILITIES FOR PERSONS WITH MENTAL DISABILITIES INC				
15062 COUNTY ROAD 1145						15062 CR 1145				
TYLER		TX	75704		TYLER		TX	75704		
Phone	(903) 596-8100		Fax	(903) 596-8104		PHONE:	(903) 596-8100		FAX:	(903) 596-8104
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		8		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		11/10/2017		
County	SMITH			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER		
Facility Information:		Facility ID:		106368		<u>Owner Information</u>				
BRECKENRIDGE VILLAGE OF TYLER-BARNABAS HOUSE						BAPTIST CARE FACILITIES FOR PERSONS WITH MENTAL DISABILITIES INC				
15062 COUNTY ROAD 1145						15062 CR 1145				
TYLER		TX	75704		TYLER		TX	75704		
Phone	(903) 596-8100		Fax	(903) 596-8104		PHONE:	(903) 596-8100		FAX:	(903) 596-8104
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		8		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		09/18/2017		
County	SMITH			Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER		
Facility Information:		Facility ID:		105449		<u>Owner Information</u>				
BRECKENRIDGE VILLAGE OF TYLER-EAGLES NEST HOUSE						BAPTIST CARE FACILITIES FOR PERSONS WITH MENTAL DISABILITIES INC				
15062 CR 1145						15062 CR 1145				
TYLER		TX	75704		TYLER		TX	75704		
Phone	(903) 596-8100		Fax	(903) 596-8104		PHONE:	(903) 596-8100		FAX:	(903) 596-8104
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6		
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		02/08/2017		

County	SMITH	Reg Svcs:		ICF/IID TEAM	Region	04 - TYLER
Facility Information:		Facility ID:	007286	<u>Owner Information</u>		
COPELAND HOUSE				COMMUNITY ACCESS INC		
3600 NEW COPELAND RD				2040 SHILOH RD		
TYLER		TX	75701	TYLER	TX	75703
Phone	(903) 581-8812	Fax	(903) 526-0881	PHONE:	(903) 579-8527	FAX: (903) 526-0881
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	02/28/2019	
County	SMITH	Reg Svcs:		ICF/IID TEAM	Region	04 - TYLER
Facility Information:		Facility ID:	007342	<u>Owner Information</u>		
GAIL HOUSE				COMMUNITY ACCESS INC		
3323 GAIL LN				2040 SHILOH RD		
TYLER		TX	75701	TYLER	TX	75703
Phone	(903) 566-1441	Fax	(903) 526-0881	PHONE:	(903) 579-8527	FAX: (903) 526-0881
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	05/19/2018	
County	SMITH	Reg Svcs:		ICF/IID TEAM	Region	04 - TYLER
Facility Information:		Facility ID:	007593	<u>Owner Information</u>		
MARTHA HOUSE				COMMUNITY ACCESS INC		
2616 POUNDS ST				2040 SHILOH RD		
TYLER		TX	75701	TYLER	TX	75703
Phone	(903) 531-9960	Fax	(903) 526-0881	PHONE:	(903) 579-8527	FAX: (903) 526-0881
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	03/18/2018	
County	SMITH	Reg Svcs:		ICF/IID TEAM	Region	04 - TYLER
Facility Information:		Facility ID:	003634	<u>Owner Information</u>		
PETTIT HOUSE				COMMUNITY ACCESS INC		
1519 PETTIT ST				2040 SHILOH RD		
TYLER		TX	75701	TYLER	TX	75703
Phone	(903) 509-9932	Fax	(903) 526-0881	PHONE:	(903) 579-8527	FAX: (903) 526-0881
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	10/01/2017	
County	SMITH	Reg Svcs:		ICF/IID TEAM	Region	04 - TYLER
Facility Information:		Facility ID:	003776	<u>Owner Information</u>		
PHILLIPS GROUP HOME				ANDREWS CENTER		
210 WEST PHILLIPS				2323 W FRONT ST		
TYLER		TX	75701	TYLER	TX	75702
Phone	(903) 593-7191	Fax		PHONE:	(903) 567-1351	FAX: (903) 535-7384
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	12	
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID	SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		
County	SMITH	Reg Svcs:		ICF/IID TEAM	Region	04 - TYLER
Facility Information:		Facility ID:	007345	<u>Owner Information</u>		
PRESTON HOUSE				COMMUNITY ACCESS INC		
2525 PRESTON				2040 SHILOH RD		
TYLER		TX	75701	TYLER	TX	75703
Phone	(903) 595-4430	Fax	(903) 526-0881	PHONE:	(903) 579-8527	FAX: (903) 526-0881
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	10/15/2017	

County	SMITH	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID:	007496	<u>Owner Information</u>		
SHAFFER HOUSE			COMMUNITY ACCESS INC		
2812 SHAFFER LN			2040 SHILOH RD		
TYLER	TX	75702	TYLER	TX	75703
Phone	(903) 595-5392	Fax	(903) 526-0881	PHONE:	(903) 579-8527
TOTAL Lic Capacity:	0	TITLE 18:	0	FAX:	(903) 526-0881
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	01/08/2018	
County	SMITH	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID:	007590	<u>Owner Information</u>		
FOREST HOUSE			COMMUNITY ACCESS INC		
306 FOREST S			2040 SHILOH RD		
WHITEHOUSE	TX	75791	TYLER	TX	75703
Phone	(903) 839-0881	Fax	(903) 526-0881	PHONE:	(903) 579-8527
TOTAL Lic Capacity:	0	TITLE 18:	0	FAX:	(903) 526-0881
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	03/04/2018	
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	007419	<u>Owner Information</u>		
1501 LOVERS LN			CALAB INC		
1501 E LOVERS LN			3803 S ROBINSON RD		
ARLINGTON	TX	76010	GRAND PRAIRIE	TX	75052-1239
Phone	(817) 226-5553	Fax	(972) 606-4792	PHONE:	(972) 263-2112
TOTAL Lic Capacity:	0	TITLE 18:	0	FAX:	(972) 263-2115
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	09/01/2017	
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	007230	<u>Owner Information</u>		
2309 CLEARWOOD COURT			CALAB INC		
2309 CLEARWOOD CT			3803 S ROBINSON RD		
ARLINGTON	TX	76014	GRAND PRAIRIE	TX	75052-1239
Phone	(817) 226-1346	Fax	(972) 606-4792	PHONE:	(972) 263-2112
TOTAL Lic Capacity:	0	TITLE 18:	0	FAX:	(972) 263-2115
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	09/01/2017	
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	007352	<u>Owner Information</u>		
2410 EDINBURGH			CALAB INC		
2410 EDINBURGH			3803 S ROBINSON RD		
ARLINGTON	TX	76018	GRAND PRAIRIE	TX	75052-1239
Phone	(817) 784-3626	Fax	(972) 606-4792	PHONE:	(972) 263-2112
TOTAL Lic Capacity:	0	TITLE 18:	0	FAX:	(972) 263-2115
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	09/01/2017	
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	007245	<u>Owner Information</u>		
4209 BLOSSOM TRAIL			CALAB INC		
4209 BLOSSOM TR			3803 S ROBINSON RD		
ARLINGTON	TX	76016	GRAND PRAIRIE	TX	75052-1239
Phone	(817) 516-7577	Fax	(972) 606-4792	PHONE:	(972) 263-2112
TOTAL Lic Capacity:	0	TITLE 18:	0	FAX:	(972) 263-2115
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	09/01/2017	

County	TARRANT	Reg Svcs:		IID TEAM	Region		03 - ARLINGTON
Facility Information:		Facility ID:	104605	<u>Owner Information</u>			
A & M CARE INC				A & M CARE INC			
2605 GLASSBORO CIR				2410 E HWY 377			
ARLINGTON		TX	76015	GRANBURY TX		76049	
Phone	(817) 795-7999	Fax	(817) 548-0911	PHONE:		(817) 795-7999	FAX: (817) 548-0911
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:		6	
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		06/17/2017	
County	TARRANT	Reg Svcs:		IID TEAM	Region		03 - ARLINGTON
Facility Information:		Facility ID:	007584	<u>Owner Information</u>			
AMICUS AT RIFLEMAN				AMICUS, INC			
405 RIFLEMAN TRAIL				1129 N LITTLE SCHOOL RD			
ARLINGTON		TX	76018	ARLINGTON TX		76017-1900	
Phone	(817) 467-3626	Fax	(817) 563-7906	PHONE:		(817) 563-7900	FAX: (817) 563-7906
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:		6	
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		09/01/2017	
County	TARRANT	Reg Svcs:		IID TEAM	Region		03 - ARLINGTON
Facility Information:		Facility ID:	007526	<u>Owner Information</u>			
AMICUS AT SHAWN				AMICUS, INC			
517 SHAWN COURT				1129 N LITTLE SCHOOL RD			
ARLINGTON		TX	76014	ARLINGTON TX		76017-1900	
Phone	(817) 784-1806	Fax	(817) 563-7906	PHONE:		(817) 563-7900	FAX: (817) 563-7906
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:		6	
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		12/01/2017	
County	TARRANT	Reg Svcs:		IID TEAM	Region		03 - ARLINGTON
Facility Information:		Facility ID:	007589	<u>Owner Information</u>			
AMICUS AT XAVIER				AMICUS, INC			
817 XAVIER DR				1129 N LITTLE SCHOOL RD			
ARLINGTON		TX	76001	ARLINGTON TX		76017-1900	
Phone	(817) 467-3731	Fax	(817) 563-7906	PHONE:		(817) 563-7900	FAX: (817) 563-7906
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:		6	
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		09/01/2017	
County	TARRANT	Reg Svcs:		IID TEAM	Region		03 - ARLINGTON
Facility Information:		Facility ID:	007473	<u>Owner Information</u>			
BOSQUE COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
1919 BOSQUE LN				9901 LINN STATION ROAD			
ARLINGTON		TX	76006	LOUISVILLE KY		40223-3808	
Phone	(817) 548-9444	Fax		PHONE:		(502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:		6	
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		01/01/2019	
County	TARRANT	Reg Svcs:		IID TEAM	Region		03 - ARLINGTON
Facility Information:		Facility ID:	007817	<u>Owner Information</u>			
CALIFORNIA				TARRANT COUNTY MHMR SERVICES			
2812 CALIFORNIA				PO BOX 2603			
ARLINGTON		TX	76016	FORT WORTH TX		76113	
Phone	(817) 860-6257	Fax		PHONE:		(817) 569-5634	FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:		6	
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:			

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007302	<b>Owner Information</b>	
CEDAR OAKS COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
1000 COKE RD				9901 LINN STATION ROAD	
ARLINGTON		<b>TX</b>	76010	LOUISVILLE KY 40223-3808	
<b>Phone</b>	(817) 459-3556	<b>Fax</b>		<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2017
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	003601	<b>Owner Information</b>	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
1824 S FIELDER				9901 LINN STATION RD	
ARLINGTON		<b>TX</b>	76013	LOUISVILLE KY 40223	
<b>Phone</b>	(817) 461-6234	<b>Fax</b>		<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2018
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007277	<b>Owner Information</b>	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
2310 SHARPSHIRE LN				9901 LINN STATION RD	
ARLINGTON		<b>TX</b>	76014	LOUISVILLE KY 40223	
<b>Phone</b>	(817) 784-0406	<b>Fax</b>		<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2018
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007281	<b>Owner Information</b>	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
4700 Mandalay Dr				9901 LINN STATION RD	
ARLINGTON		<b>TX</b>	76016	LOUISVILLE KY 40223	
<b>Phone</b>	(817) 572-7461	<b>Fax</b>		<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2018
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	003676	<b>Owner Information</b>	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
5004 MISTY WOOD DR				9901 LINN STATION RD	
ARLINGTON		<b>TX</b>	76017	LOUISVILLE KY 40223	
<b>Phone</b>	(817) 516-7469	<b>Fax</b>		<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2018
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	101452	<b>Owner Information</b>	
EVERGREEN ECHO SUMMIT COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
6218 ECHO SUMMIT LN				10810 SANDEN DR	
ARLINGTON		<b>TX</b>	76017	DALLAS TX 75238	
<b>Phone</b>	(817) 478-0774	<b>Fax</b>	(972) 386-9509	<b>PHONE:</b>	(972) 386-4834
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	05/28/2017



County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007562	<b>Owner Information</b>	
EVERGREEN ELMGROVE COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
4211 ELMGROVE				10810 SANDEN DR	
ARLINGTON		<b>TX</b>	76015	DALLAS TX 75238	
<b>Phone</b>	(817) 375-5033	<b>Fax</b>	(972) 386-9509	<b>PHONE:</b>	(972) 386-4834 <b>FAX:</b>
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>License Exp Dt:</b>	11/01/2017
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007563	<b>Owner Information</b>	
EVERGREEN ENDICOTT COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
1502 ENDICOTT				10810 SANDEN DR	
ARLINGTON		<b>TX</b>	76018	DALLAS TX 75238	
<b>Phone</b>	(817) 375-5009	<b>Fax</b>	(972) 386-9509	<b>PHONE:</b>	(972) 386-4834 <b>FAX:</b>
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>License Exp Dt:</b>	11/01/2017
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	101525	<b>Owner Information</b>	
EVERGREEN JEANNETTE EARLY COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
329 MONTANA DR				10810 SANDEN DR	
ARLINGTON		<b>TX</b>	76002	DALLAS TX 75238	
<b>Phone</b>	(817) 468-4471	<b>Fax</b>		<b>PHONE:</b>	(972) 386-4834 <b>FAX:</b>
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>License Exp Dt:</b>	08/12/2017
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	101454	<b>Owner Information</b>	
EVERGREEN SALIDA COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
911 SALIDA DR				10810 SANDEN DR	
ARLINGTON		<b>TX</b>	76001	DALLAS TX 75238	
<b>Phone</b>	(817) 477-9722	<b>Fax</b>		<b>PHONE:</b>	(972) 386-4834 <b>FAX:</b>
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>License Exp Dt:</b>	06/06/2017
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	101819	<b>Owner Information</b>	
EVERGREEN WAGNER COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
7905 PEREGRINE TRAIL				10810 SANDEN DR	
ARLINGTON		<b>TX</b>	76001	DALLAS TX 75238	
<b>Phone</b>	(817) 477-5600	<b>Fax</b>	(972) 386-9509	<b>PHONE:</b>	(972) 386-4834 <b>FAX:</b>
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>License Exp Dt:</b>	05/18/2018
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007301	<b>Owner Information</b>	
FOX HILL COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
3202 FOX HILL DR				9901 LINN STATION ROAD	
ARLINGTON		<b>TX</b>	76015	LOUISVILLE KY 40223-3808	
<b>Phone</b>	(817) 468-1444	<b>Fax</b>		<b>PHONE:</b>	(502) 394-2100 <b>FAX:</b> (502) 394-2285
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>License Exp Dt:</b>	01/01/2017

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	003952	<u>Owner Information</u>	
MAGNOLIA COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
500 MAGNOLIA				9901 LINN STATION ROAD	
ARLINGTON		TX	76012	LOUISVILLE KY 40223-3808	
Phone	(817) 543-0807	Fax	(713) 622-9141	PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2017

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	003665	<u>Owner Information</u>	
NEWSTART LIVING CENTER V				NEWSTART INC	
4503 PALOMINO CT				PO BOX 331629	
ARLINGTON		TX	76017	FORT WORTH TX 76163	
Phone	(817) 294-9675	Fax	(817) 294-9907	PHONE:	(817) 294-9675 FAX: (817) 294-9907
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	05/01/2017

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007524	<u>Owner Information</u>	
QUINCY HOUSE				A & M CARE INC	
2004 QUINCY CT				2410 E HWY 377	
ARLINGTON		TX	76013	GRANBURY TX 76049	
Phone	(817) 548-0911	Fax	(817) 459-4818	PHONE:	(817) 795-7999 FAX: (817) 548-0911
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	04/08/2018

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007576	<u>Owner Information</u>	
RACQUET CLUB				TARRANT COUNTY MHMR SERVICES	
4809 RACQUET CLUB DRIVE				PO BOX 2603	
ARLINGTON		TX	76017-2625	FORT WORTH TX 76113	
Phone	(817) 569-5632	Fax	(817) 569-4130	PHONE:	(817) 569-5634 FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	8
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007441	<u>Owner Information</u>	
REVERCHON COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
2121 REVERCHON DR				9901 LINN STATION ROAD	
ARLINGTON		TX	76017	LOUISVILLE KY 40223-3808	
Phone	(817) 557-5417	Fax		PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2017

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	003850	<u>Owner Information</u>	
SPRING CREEK COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
4806 SPRING CREEK RD				9901 LINN STATION ROAD	
ARLINGTON		TX	76017-1228	LOUISVILLE KY 40223-3808	
Phone	(817) 478-9801	Fax		PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2017

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007451	<u>Owner Information</u>	
DENVER TRAIL				MAINSTREAM HABILITATION SERVICES OF TEXAS INC	
129 DENVER TRAIL				301 COMMERCE	
AZLE		TX	76020	AZLE	TX 76020
Phone	(817) 270-2747	Fax	(817) 270-1477	PHONE:	(817) 270-2747 FAX: (817) 270-1477
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	07/29/2017
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	003957	<u>Owner Information</u>	
JAMES STREET COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
708 JAMES ST				9901 LINN STATION ROAD	
AZLE		TX	76020	LOUISVILLE	KY 40223-3808
Phone	(817) 444-0095	Fax		PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2017
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007414	<u>Owner Information</u>	
LAKEVIEW COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
1748 SPINNAKER LN				9901 LINN STATION ROAD	
AZLE		TX	76020	LOUISVILLE	KY 40223-3808
Phone	(817) 444-7177	Fax		PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2017
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007422	<u>Owner Information</u>	
LAMPLIGHTER COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
104 LAMPLIGHTER CT				9901 LINN STATION ROAD	
AZLE		TX	76020	LOUISVILLE	KY 40223-3808
Phone	(817) 237-0385	Fax		PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2017
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007395	<u>Owner Information</u>	
TRAINING RESIDENCE 6				TARRANT COUNTY MHMR SERVICES	
1619 PIPELINE ROAD				PO BOX 2603	
BEDFORD		TX	76022	FORT WORTH	TX 76113
Phone	(817) 354-8340	Fax		PHONE:	(817) 569-5634 FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007809	<u>Owner Information</u>	
WALNUT COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
3824 WALNUT DR				9901 LINN STATION ROAD	
BEDFORD		TX	76021	LOUISVILLE	KY 40223-3808
Phone	(972) 929-1145	Fax	(214) 251-1465	PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2017

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003953	<b>Owner Information</b>			
COZBY COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
106 COZBY ST S		9901 LINN STATION ROAD			
BENBROOK	TX 76126	LOUISVILLE KY 40223-3808			
<b>Phone</b> (817) 249-6269	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 01/01/2019			
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003635	<b>Owner Information</b>			
STELLA MAE		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
716 STELLA MAE		9901 LINN STATION RD			
BURLESON	TX 76028	LOUISVILLE KY 40223			
<b>Phone</b> (817) 293-4732	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 06/20/2017			
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 007397	<b>Owner Information</b>			
BUILDER ROAD		TARRANT COUNTY MHMR SERVICES			
2200 BUILDER ROAD		PO BOX 2603			
CROWLEY	TX 76036-4615	FORT WORTH TX 76113			
<b>Phone</b> (817) 332-4778	<b>Fax</b>	<b>PHONE:</b> (817) 569-5634 <b>FAX:</b>			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> GOVERNMENT BASED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b>			
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003845	<b>Owner Information</b>			
NEUWSTART LIVING CENTER I		NEUWSTART INC			
305 N BEVERLY ST		PO BOX 331629			
CROWLEY	TX 76036	FORT WORTH TX 76163			
<b>Phone</b> (817) 297-1325	<b>Fax</b> (817) 294-9907	<b>PHONE:</b> (817) 294-9675 <b>FAX:</b> (817) 294-9907			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 06/01/2018			
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003670	<b>Owner Information</b>			
SUMMER HOUSE		ROCK HOUSE SUPPORT SERVICES INC			
1925 CATTLE DRIVE CT		2252 LINGLEVILLE ROAD HWY 8			
CROWLEY	TX 76036	STEPHENVILLE TX 76401			
<b>Phone</b> (512) 863-5095	<b>Fax</b> (512) 869-2176	<b>PHONE:</b> (254) 968-4004 <b>FAX:</b> (254) 965-8653			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 10/05/2017			
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 007575	<b>Owner Information</b>			
AMICUS AT MILLS		AMICUS, INC			
512 S MILLS DR		1129 N LITTLE SCHOOL RD			
EULESS	TX 76040	ARLINGTON TX 76017-1900			
<b>Phone</b> (817) 355-9661	<b>Fax</b> (817) 563-7906	<b>PHONE:</b> (817) 563-7900 <b>FAX:</b> (817) 563-7906			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 01/01/2018			

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007262	<u>Owner Information</u>	
CHAMBERS CREEK COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
613 CHAMBERS CRK				9901 LINN STATION ROAD	
EVERMAN		TX	76140	LOUISVILLE	KY 40223-3808
Phone	(817) 551-7783	Fax		PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2019
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	003870	<u>Owner Information</u>	
NEWSTART LIVING CENTER II				NEWSTART INC	
1000 COURY RD				PO BOX 331629	
EVERMAN		TX	76140	FORT WORTH	TX 76163
Phone	(817) 294-9675	Fax	(817) 294-9907	PHONE:	(817) 294-9675 FAX: (817) 294-9907
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	11/02/2017
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	003931	<u>Owner Information</u>	
NEWSTART LIVING CENTER III				NEWSTART INC	
5124 QUEEN ANNE DR				PO BOX 331629	
FOREST HILL		TX	76119	FORT WORTH	TX 76163
Phone	(817) 294-9675	Fax	(817) 294-9907	PHONE:	(817) 294-9675 FAX: (817) 294-9907
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	05/01/2017
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	105597	<u>Owner Information</u>	
2YORK				ROCK HOUSE SUPPORT SERVICES INC	
2 YORK DRIVE				2252 LINGLEVILLE ROAD HWY 8	
FORT WORTH		TX	76134	STEPHENVILLE	TX 76401
Phone	(817) 615-8848	Fax	(817) 294-4516	PHONE:	(254) 968-4004 FAX: (254) 965-8653
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	07/19/2017
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	003855	<u>Owner Information</u>	
BARCELONA				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
4308 BARCELONA				9901 LINN STATION ROAD	
FORT WORTH		TX	76133-5410	LOUISVILLE	KY 40223-3808
Phone	(817) 292-0766	Fax		PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	08/12/2017
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007802	<u>Owner Information</u>	
CIBOLO HOUSE				TARRANT COUNTY MHMR SERVICES	
3704 CIBOLO				PO BOX 2603	
FORT WORTH		TX	76133	FORT WORTH	TX 76113
Phone	(817) 292-8505	Fax		PHONE:	(817) 569-5634 FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 007544	<b>Owner Information</b>			
COUNTRY MANOR COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
1812 COUNTRY MANOR RD		9901 LINN STATION ROAD			
FORT WORTH	TX 76133-3500	LOUISVILLE KY 40223-3808			
<b>Phone</b> (817) 293-7046	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 01/01/2017			
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003683	<b>Owner Information</b>			
CRAIG STREET		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
7504 CRAIG ST		9901 LINN STATION RD			
FORT WORTH	TX 76112	LOUISVILLE KY 40223			
<b>Phone</b> (817) 451-2228	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 07/16/2018			
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 007226	<b>Owner Information</b>			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
1433 BARRON LN		9901 LINN STATION RD			
FORT WORTH	TX 76112	LOUISVILLE KY 40223			
<b>Phone</b> (817) 654-1052	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 01/01/2018			
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 007240	<b>Owner Information</b>			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
5009 MARBLE FALLS		9901 LINN STATION RD			
FORT WORTH	TX 76103	LOUISVILLE KY 40223			
<b>Phone</b> (817) 429-0137	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 01/01/2018			
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 007388	<b>Owner Information</b>			
FAIRMEADOWS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
3309 FAIRMEADOWS		9901 LINN STATION RD			
FORT WORTH	TX 76123	LOUISVILLE KY 40223			
<b>Phone</b> (817) 292-7328	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 06/20/2017			
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 007529	<b>Owner Information</b>			
FOREST CREEK		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
2520 FOREST CREEK DR		9901 LINN STATION RD			
FORT WORTH	TX 76123	LOUISVILLE KY 40223			
<b>Phone</b> (817) 294-4015	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 06/20/2017			

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003636	<b>Owner Information</b>			
HASTINGS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
5320 HASTINGS		9901 LINN STATION RD			
FORT WORTH	TX 76133	LOUISVILLE KY 40223			
<b>Phone</b> (817) 370-1254	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 06/20/2017			
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 007303	<b>Owner Information</b>			
HUNTWICK		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
3744 HUNTWICK DR		9901 LINN STATION RD			
FORT WORTH	TX 76123	LOUISVILLE KY 40223			
<b>Phone</b> (817) 370-2956	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 08/19/2018			
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003849	<b>Owner Information</b>			
KINGSWOOD COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
6717 KINGSWOOD DR		9901 LINN STATION ROAD			
FORT WORTH	TX 76133-5317	LOUISVILLE KY 40223-3808			
<b>Phone</b> (817) 294-9425	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 08/20/2017			
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 007551	<b>Owner Information</b>			
LONGMEADOW COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
4120 LONGMEADOW WAY		9901 LINN STATION ROAD			
FORT WORTH	TX 76134	LOUISVILLE KY 40223-3808			
<b>Phone</b> (817) 292-0533	<b>Fax</b>	<b>PHONE:</b> (502) 394-2100 <b>FAX:</b> (502) 394-2285			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 01/01/2018			
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 007329	<b>Owner Information</b>			
MOUNTAIN RIDGE		MAINSTREAM HABILITATION SERVICES OF TEXAS INC			
717 MOUNTAIN RIDGE COURT WEST		301 COMMERCE			
FORT WORTH	TX 76135	AZLE TX 76020			
<b>Phone</b> (817) 270-2747	<b>Fax</b> (817) 270-1477	<b>PHONE:</b> (817) 270-2747 <b>FAX:</b> (817) 270-1477			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 07/11/2017			
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>	<b>Facility ID:</b> 003843	<b>Owner Information</b>			
OAKLAND PARK		SOUTHERN CONCEPTS INC			
4613/15 MENZER		PO BOX 758			
FORT WORTH	TX 76103	GRANBURY TX 76048			
<b>Phone</b> (817) 496-0252	<b>Fax</b> (817) 579-6611	<b>PHONE:</b> (817) 573-6922 <b>FAX:</b> (817) 579-6611			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6			
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0	<b>PROGRAM TYPE:</b> ICF/IID <b>SERVICE TYPE</b> PRIVATELY OWNED			
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 04/01/2018			

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	007285	<u>Owner Information</u>		
OHARA			EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		
8321 OHARA			9901 LINN STATION RD		
FORT WORTH	TX	76123	LOUISVILLE	KY	40223
Phone	(817) 294-4945	Fax	(817) 563-1575	PHONE:	(502) 394-2100
				FAX:	(502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	06/20/2017	
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	007815	<u>Owner Information</u>		
POCO			EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP		
6505 POCO COURT			9901 LINN STATION ROAD		
FORT WORTH	TX	76133	LOUISVILLE	KY	40223-3808
Phone	(817) 294-9663	Fax	(817) 663-5090	PHONE:	(502) 394-2100
				FAX:	(502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	09/13/2017	
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	007476	<u>Owner Information</u>		
SAFE CARE III			SCP ACQUISITION PARTNERS LTD		
4244 RIVER BIRCH			4244 RIVER BIRCH RD		
FORT WORTH	TX	76137	FORT WORTH	TX	76137
Phone	(817) 847-5741	Fax	(817) 847-5721	PHONE:	(817) 847-5741
				FAX:	(817) 847-5721
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	08/01/2018	
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	007464	<u>Owner Information</u>		
SAFE CARE IV			SCP ACQUISITION PARTNERS LTD		
7105 BENTLEY			4244 RIVER BIRCH RD		
FORT WORTH	TX	76137	FORT WORTH	TX	76137
Phone	(817) 577-2490	Fax	(817) 847-5741	PHONE:	(817) 847-5741
				FAX:	(817) 847-5721
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	08/01/2018	
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	003829	<u>Owner Information</u>		
TARRANT COUNTY MHMR SERVICES TRAINING RESIDENCE 2			TARRANT COUNTY MHMR SERVICES		
701 SANDY LN			PO BOX 2603		
FORT WORTH	TX	76120	FORT WORTH	TX	76113
Phone	(817) 446-8324	Fax		PHONE:	(817) 569-5634
				FAX:	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	8
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	GOVERNMENT BASED
			License Exp Dt:		
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	003812	<u>Owner Information</u>		
TARRANT COUNTY MHMR SERVICES TRAINING RESIDENCE 5			TARRANT COUNTY MHMR SERVICES		
4833 DIAZ			PO BOX 2603		
FORT WORTH	TX	76107	FORT WORTH	TX	76113
Phone	(817) 731-3522	Fax		PHONE:	(817) 569-5634
				FAX:	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	8
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	GOVERNMENT BASED
			License Exp Dt:		



County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007370	Owner Information	
TRAINING RESIDENCE 7				TARRANT COUNTY MHMR SERVICES	
6312 KINGSWOOD				PO BOX 2603	
FORT WORTH		TX	76133	FORT WORTH TX 76113	
Phone	(817) 370-9465	Fax		PHONE:	(817) 569-5634 FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007351	Owner Information	
TRAINING RESIDENCE 8 TARRANT COUNTY MHMR				TARRANT COUNTY MHMR SERVICES	
6341 JUNEAU				PO BOX 2603	
FORT WORTH		TX	76116	FORT WORTH TX 76113	
Phone	(817) 737-2919	Fax		PHONE:	(817) 569-5634 FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	003648	Owner Information	
VINEWOOD				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
1641 VINEWOOD				9901 LINN STATION RD	
FORT WORTH		TX	76112	LOUISVILLE KY 40223	
Phone	(817) 457-7095	Fax		PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	02/27/2018
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	003641	Owner Information	
WHITMAN				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
6524 WHITMAN				9901 LINN STATION RD	
FORT WORTH		TX	76133	LOUISVILLE KY 40223	
Phone	(817) 294-8229	Fax		PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/22/2018
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	003739	Owner Information	
WILLIAMS ROAD				TARRANT COUNTY MHMR SERVICES	
1136 WILLIAMS ROAD				PO BOX 2603	
FORT WORTH		TX	76120	FORT WORTH TX 76113	
Phone	(817) 731-3985	Fax		PHONE:	(817) 569-5634 FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	8
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:		Facility ID:	007477	Owner Information	
WINIFRED COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
5724 WINIFRED DR				9901 LINN STATION ROAD	
FORT WORTH		TX	76133	LOUISVILLE KY 40223-3808	
Phone	(817) 292-5398	Fax		PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2019

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007637	<b>Owner Information</b>	
WORRELL				TARRANT COUNTY MHMR SERVICES	
5682 WORRELL				PO BOX 2603	
FORT WORTH		<b>TX</b>	76133	FORT WORTH TX 76113	
<b>Phone</b>	(817) 569-5634	<b>Fax</b>		<b>PHONE:</b>	(817) 569-5634
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	GOVERNMENT BASED
				<b>License Exp Dt:</b>	11/20/2003
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007614	<b>Owner Information</b>	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
4333 COVENTRY DR				9901 LINN STATION RD	
GRAND PRAIRIE		<b>TX</b>	75052	LOUISVILLE KY 40223	
<b>Phone</b>	(972) 647-2311	<b>Fax</b>	(972) 606-1804	<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>FAX:</b>	(502) 394-2285
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2018
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007453	<b>Owner Information</b>	
WALNUT CREEK RESIDENTIAL SERVICES, INC.				WALNUT CREEK RESIDENTIAL SERVICES INC	
4611 YALE DR.				2846 BIRMINGHAM DR	
GRAND PRAIRIE		<b>TX</b>	75052	GRAND PRAIRIE TX 75052	
<b>Phone</b>	(972) 641-7696	<b>Fax</b>	(972) 641-7695	<b>PHONE:</b>	(972) 641-7696
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>FAX:</b>	(972) 641-7695
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/29/2017
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	007417	<b>Owner Information</b>	
BROOKWOOD II				SOUTHLAKE EDUCATIONAL CENTER INC	
649 CIRCLE VIEW S				2846 BIRMINGHAM DR	
HURST		<b>TX</b>	76054	GRAND PRAIRIE TX 75052	
<b>Phone</b>	(817) 268-8015	<b>Fax</b>	(972) 641-7695	<b>PHONE:</b>	(972) 641-7696
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>FAX:</b>	(972) 641-7695
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	03/01/2017
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	003942	<b>Owner Information</b>	
HURSTVIEW COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
540 HURSTVIEW				9901 LINN STATION ROAD	
HURST		<b>TX</b>	76053-6605	LOUISVILLE KY 40223-3808	
<b>Phone</b>	(817) 282-6362	<b>Fax</b>		<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>FAX:</b>	(502) 394-2285
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2017
County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
<b>Facility Information:</b>		<b>Facility ID:</b>	003998	<b>Owner Information</b>	
NEWSTART LIVING CENTER IV				NEWSTART INC	
201 WISTERIA				PO BOX 331629	
MANSFIELD		<b>TX</b>	76063	FORT WORTH TX 76163	
<b>Phone</b>	(817) 294-9675	<b>Fax</b>	(817) 294-9907	<b>PHONE:</b>	(817) 294-9675
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>FAX:</b>	(817) 294-9907
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	05/01/2018

County	TARRANT	Reg Svcs:		IID TEAM	Region		03 - ARLINGTON	
Facility Information:		Facility ID:	007276	<u>Owner Information</u>				
BROOKWOOD I				LANGUAGE RESOURCE CENTER INC				
2900 BROOKWOOD LN				2846 BIRMINGHAM DR				
SOUTHLAKE		TX	76092	GRAND PRAIRIE TX		75052		
Phone	(817) 329-1098	Fax	(972) 641-7696	PHONE:		(972) 641-7696	FAX:	(972) 641-7695
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:		6		
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		03/01/2017		
County	TARRANT	Reg Svcs:		IID TEAM	Region		03 - ARLINGTON	
Facility Information:		Facility ID:	007623	<u>Owner Information</u>				
BROOKWOOD I I I				21ST CENTURY LIVING CENTERS INC				
2410 TAYLOR ST				2846 BIRMINGHAM DR				
SOUTHLAKE		TX	76092	GRAND PRAIRIE TX		75052		
Phone	(817) 424-3338	Fax	(972) 641-7695	PHONE:		(972) 641-7696	FAX:	(972) 641-7695
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:		6		
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		03/01/2017		
County	TARRANT	Reg Svcs:		IID TEAM	Region		03 - ARLINGTON	
Facility Information:		Facility ID:	007353	<u>Owner Information</u>				
SAFE CARE I				SCP ACQUISITION PARTNERS LTD				
6517 BROOKSIDE DR				4244 RIVER BIRCH RD				
WATAUGA		TX	76148	FORT WORTH TX		76137		
Phone	(817) 485-9529	Fax	(817) 847-5721	PHONE:		(817) 847-5741	FAX:	(817) 847-5721
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:		6		
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		08/01/2018		
County	TARRANT	Reg Svcs:		IID TEAM	Region		03 - ARLINGTON	
Facility Information:		Facility ID:	007410	<u>Owner Information</u>				
SAFE CARE II				SCP ACQUISITION PARTNERS LTD				
8005 LAZY BROOK DR				4244 RIVER BIRCH RD				
WATAUGA		TX	76148	FORT WORTH TX		76137		
Phone	(817) 485-6807	Fax	(817) 847-5721	PHONE:		(817) 847-5741	FAX:	(817) 847-5721
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:		6		
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		08/01/2018		
County	TARRANT	Reg Svcs:		IID TEAM	Region		03 - ARLINGTON	
Facility Information:		Facility ID:	007425	<u>Owner Information</u>				
ALYSSA 1				MHS OF TEXAS II INC				
9220 ALYSSA DR				9220 ALYSSA				
WHITE SETTLEMENT		TX	76108	WHITE SETTLEMENT TX		76108		
Phone	(817) 270-2747	Fax	(817) 270-1477	PHONE:		(817) 270-2747	FAX:	(817) 270-1477
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:		6		
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		08/01/2017		
County	TARRANT	Reg Svcs:		IID TEAM	Region		03 - ARLINGTON	
Facility Information:		Facility ID:	007305	<u>Owner Information</u>				
ALYSSA 2				MHS OF TEXAS II INC				
9212 ALYSSA				9220 ALYSSA				
WHITE SETTLEMENT		TX	76108	WHITE SETTLEMENT TX		76108		
Phone	(817) 270-2747	Fax	(817) 270-1477	PHONE:		(817) 270-2747	FAX:	(817) 270-1477
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:		6		
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		08/01/2017		

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
<b>Facility Information:</b>	<b>Facility ID:</b> 003728	<b>Owner Information</b>			
ABILENE COMMUNITY RESIDENCE		KENMAR RESIDENTIAL SERVICES INCORPORATED			
3110 BUFFALO GAP RD		33 CYPRESS BLVD ,SUITE 100			
ABILENE TX 79605		ROUND ROCK TX 78665			
<b>Phone</b> (325) 691-0810	<b>Fax</b> (325) 691-1817	<b>PHONE:</b> (512) 336-0800	<b>FAX:</b> (512) 336-0812		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 13	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 03/15/2018			
County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
<b>Facility Information:</b>	<b>Facility ID:</b> 007100	<b>Owner Information</b>			
ABILENE STATE SUPPORTED LIVING CENTER		DADS			
2500 MAPLE ST		PO BOX 12668			
ABILENE TX 79604		AUSTIN TX 78711			
<b>Phone</b> (325) 692-4053	<b>Fax</b> (325) 795-3853	<b>PHONE:</b> (512) 454-3761	<b>FAX:</b>		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 662	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	STATE SCHOOL/STATE CENTER
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b>			
County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
<b>Facility Information:</b>	<b>Facility ID:</b> 007383	<b>Owner Information</b>			
BACON COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
634 BACON DR		9901 LINN STATION ROAD			
ABILENE TX 79601-2051		LOUISVILLE KY 40223-3808			
<b>Phone</b> (325) 676-1473	<b>Fax</b> (325) 676-1673	<b>PHONE:</b> (502) 394-2100	<b>FAX:</b> (502) 394-2285		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 01/01/2017			
County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
<b>Facility Information:</b>	<b>Facility ID:</b> 003749	<b>Owner Information</b>			
BIG SKY RANCH		D & S RESIDENTIAL SERVICES LP			
2234 B AMY LYN AVE		8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300			
ABILENE TX 79603		AUSTIN TX 78759			
<b>Phone</b> (325) 676-5671	<b>Fax</b> (512) 327-5355	<b>PHONE:</b> (512) 327-2325	<b>FAX:</b> (512) 327-5355		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 13	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 12/01/2017			
County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
<b>Facility Information:</b>	<b>Facility ID:</b> 007324	<b>Owner Information</b>			
BRENDA COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
2326 BRENDA ST		9901 LINN STATION ROAD			
ABILENE TX 79605-1118		LOUISVILLE KY 40223-3808			
<b>Phone</b> (325) 676-1473	<b>Fax</b> (325) 676-1673	<b>PHONE:</b> (502) 394-2100	<b>FAX:</b> (502) 394-2285		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 01/01/2019			
County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
<b>Facility Information:</b>	<b>Facility ID:</b> 007354	<b>Owner Information</b>			
EAST LAKE		HILL RESOURCES INC			
3325 E LAKE RD		1071 N JUDGE ELY BLVD ,# 6424			
ABILENE TX 79601		ABILENE TX 79601			
<b>Phone</b> (325) 673-3346	<b>Fax</b> (325) 794-0023	<b>PHONE:</b> (325) 673-3346	<b>FAX:</b> (325) 794-0023		
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0				
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0	<b>License Exp Dt:</b> 01/10/2018			

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:		Facility ID:	007803	<u>Owner Information</u>	
HAWTHORNE HOUSE				DISABILITY RESOURCES INC	
526 HAWTHORNE ST				3602 N. CLACK ST.	
ABILENE		TX	79605	ABILENE	TX 79601
Phone	(325) 695-1516	Fax	(325) 677-6815	PHONE:	(325) 336-3670 FAX: (325) 673-7829
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	10/30/2017
County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:		Facility ID:	003667	<u>Owner Information</u>	
HIGH LIFE				SOMA RESOURCES INC	
#2 HIGH LIFE CIR				2449 S WILLIS ,STE 201	
ABILENE		TX	79606	ABILENE	TX 79605
Phone	(325) 690-1508	Fax	(915) 695-2707	PHONE:	(325) 695-7860 FAX: (325) 695-2707
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	06/01/2018
County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:		Facility ID:	007501	<u>Owner Information</u>	
HIGHLAND COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
1366 HIGHLAND AVE				9901 LINN STATION ROAD	
ABILENE		TX	79605-4251	LOUISVILLE KY	40223-3808
Phone	(325) 676-1473	Fax	(325) 676-1673	PHONE:	(502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/01/2017
County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:		Facility ID:	007259	<u>Owner Information</u>	
LEA FARMS RESIDENCE				GRACE RESIDENTIAL ENTERPRISES	
1318 PIEDMONT				14504 COMANS RD ,APT 1204	
ABILENE		TX	79601	ABILENE	TX 79602
Phone	(325) 673-3397	Fax	(325) 673-3397	PHONE:	(512) 426-7618 FAX:
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	04/05/2018
County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:		Facility ID:	007568	<u>Owner Information</u>	
LOVE & CARE RESIDENTIAL SERVICES LLC				LOVE & CARE RESIDENTIAL SERVICES LLC	
1317 LAWYERS LN				1317 LAWYER'S LANE	
ABILENE		TX	79602	ABILENE	TX 79602
Phone	(325) 673-2559	Fax	(325) 673-2559	PHONE:	(325) 673-2559 FAX: (325) 673-2559
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	10/01/2017
County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:		Facility ID:	003770	<u>Owner Information</u>	
MESQUITE VILLA				D & S RESIDENTIAL SERVICES LP	
2234 A AMY LYN AVE				8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300	
ABILENE		TX	79603	AUSTIN TX	78759
Phone	(325) 676-5662	Fax	(512) 327-5355	PHONE:	(512) 327-2325 FAX: (512) 327-5355
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	13
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	01/08/2018

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID:	007814	<u>Owner Information</u>		
NORTH 9TH HOUSE			DISABILITY RESOURCES INC		
4210 N 9TH			3602 N. CLACK ST.		
ABILENE	TX	79603	ABILENE	TX	79601
Phone	(325) 677-5026	Fax	PHONE: (325) 336-3670 FAX: (325) 673-7829		
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	11/04/2017	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID:	007298	<u>Owner Information</u>		
NORTH WILLIS			SOMA RESOURCES INC		
1855 N WILLIS ST			2449 S WILLIS ,STE 201		
ABILENE	TX	79603	ABILENE	TX	79605
Phone	(325) 673-8837	Fax	(325) 695-2707	PHONE:	(325) 695-7860 FAX: (325) 695-2707
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	06/01/2018	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID:	106671	<u>Owner Information</u>		
ORSBURN HOUSE			DISABILITY RESOURCES INC		
3258 VARNER LANE			3602 N. CLACK ST.		
ABILENE	TX	79601	ABILENE	TX	79601
Phone	(325) 669-3670	Fax	(325) 665-8749	PHONE:	(325) 336-3670 FAX: (325) 673-7829
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	12/13/2018	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID:	007386	<u>Owner Information</u>		
OVER STREET			SOMA RESOURCES INC		
3190 OVER ST			2449 S WILLIS ,STE 201		
ABILENE	TX	79605	ABILENE	TX	79605
Phone	(325) 691-0906	Fax	(325) 695-2707	PHONE:	(325) 695-7860 FAX: (325) 695-2707
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	06/01/2018	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID:	010198	<u>Owner Information</u>		
PARSONS COMMUNITY HOME			EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP		
910 PARSONS RD			9901 LINN STATION ROAD		
ABILENE	TX	79602-3110	LOUISVILLE	KY	40223-3808
Phone	(325) 676-1473	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285		
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	01/03/2019	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID:	007510	<u>Owner Information</u>		
RICHLAND			SOMA RESOURCES INC		
2010 RICHLAND ST			2449 S WILLIS ,STE 201		
ABILENE	TX	79605	ABILENE	TX	79605
Phone	(325) 673-1418	Fax	(325) 695-2707	PHONE:	(325) 695-7860 FAX: (325) 695-2707
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	06/01/2018	

County	TAYLOR		Reg Svcs:	ICF/IID		Region	02 - ABILENE	
<b>Facility Information:</b>	<b>Facility ID:</b>	007251				<b>Owner Information</b>		
ROYAL COURT						SOMA RESOURCES INC		
4601 ROYAL CT						2449 S WILLIS		,STE 201
ABILENE	<b>TX</b>	79605				ABILENE	<b>TX</b>	79605
<b>Phone</b>	(325) 695-7860	<b>Fax</b>	(325) 695-2707			<b>PHONE:</b>	(325) 695-7860	<b>FAX:</b> (325) 695-2707
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	06/01/2018	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	TAYLOR		Reg Svcs:	ICF/IID		Region	02 - ABILENE	
<b>Facility Information:</b>	<b>Facility ID:</b>	007254				<b>Owner Information</b>		
STEPPING STONES RESIDENTIAL RESOURCES						HILL RESOURCES II INC		
965 WASHINGTON BLVD						1071 N JUDGE ELY BLVD		,# 6424
ABILENE	<b>TX</b>	79601				ABILENE	<b>TX</b>	79601
<b>Phone</b>	(325) 673-3346	<b>Fax</b>	(325) 794-0023			<b>PHONE:</b>	(325) 673-3346	<b>FAX:</b> (325) 794-0023
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	12/01/2017	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	TAYLOR		Reg Svcs:	ICF/IID		Region	02 - ABILENE	
<b>Facility Information:</b>	<b>Facility ID:</b>	007578				<b>Owner Information</b>		
WOODRIDGE						SOMA RESOURCES INC		
3410 WOODRIDGE ST						2449 S WILLIS		,STE 201
ABILENE	<b>TX</b>	79605				ABILENE	<b>TX</b>	79605
<b>Phone</b>	(325) 692-6800	<b>Fax</b>	(325) 695-2707			<b>PHONE:</b>	(325) 695-7860	<b>FAX:</b> (325) 695-2707
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	06/01/2018	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	TITUS		Reg Svcs:	ICF/IID TEAM		Region	04 - TYLER	
<b>Facility Information:</b>	<b>Facility ID:</b>	007517				<b>Owner Information</b>		
PLEASANT LIVING INC						PLEASANT LIVING INC		
2003 HAPPY ST						2003 HAPPY STREET		
MOUNT PLEASANT	<b>TX</b>	75455				MOUNT PLEASANT	<b>TX</b>	75456
<b>Phone</b>	(903) 572-6402	<b>Fax</b>	(903) 572-6403			<b>PHONE:</b>	(903) 572-6402	<b>FAX:</b> (903) 572-6403
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	05/01/2018	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	TOM GREEN		Reg Svcs:	ICF/IID		Region	09 - ABILENE	
<b>Facility Information:</b>	<b>Facility ID:</b>	007108				<b>Owner Information</b>		
SAN ANGELO STATE SUPPORTED LIVING CENTER						DADS		
HIGHWAY 87						PO BOX 12668		
CARLSBAD	<b>TX</b>	76934				AUSTIN	<b>TX</b>	78711
<b>Phone</b>	(325) 465-4391	<b>Fax</b>	(325) 465-2135			<b>PHONE:</b>	(512) 454-3761	<b>FAX:</b>
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	375	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> STATE SCHOOL/STATE CENTER
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>		
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	TOM GREEN		Reg Svcs:	ICF/IID		Region	09 - ABILENE	
<b>Facility Information:</b>	<b>Facility ID:</b>	007596				<b>Owner Information</b>		
BLUEBONNET HOMES 1						BLUEBONNET HOMES INC		
1822 CORDELL						128 S MAGDALEN		
SAN ANGELO	<b>TX</b>	76901				SAN ANGELO	<b>TX</b>	76903
<b>Phone</b>	(325) 944-4374	<b>Fax</b>	(325) 659-3769			<b>PHONE:</b>	(325) 658-6664	<b>FAX:</b> (325) 659-3769
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	04/06/2018	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					

County	TOM GREEN			Reg Svcs:	ICF/IID		Region	09 - ABILENE	
Facility Information:		Facility ID:	007357		<u>Owner Information</u>				
BLUEBONNET HOMES 2					BLUEBONNET HOMES INC				
236 WESTWOOD					128 S MAGDALEN				
SAN ANGELO		TX	76901					76903	
Phone	(325) 947-1300	Fax	(325) 659-3769						
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PHONE:	(325) 658-6664	FAX:	(325) 659-3769
Cert Alzh Capacity:	0	TITLE19:	0			PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	01/22/2018		
County	TOM GREEN			Reg Svcs:	ICF/IID		Region	09 - ABILENE	
Facility Information:		Facility ID:	007358		<u>Owner Information</u>				
BLUEBONNET HOMES 3					BLUEBONNET HOMES INC				
1135 E 25TH					128 S MAGDALEN				
SAN ANGELO		TX	76903					76903	
Phone	(325) 658-6664	Fax	(325) 659-3769						
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PHONE:	(325) 658-6664	FAX:	(325) 659-3769
Cert Alzh Capacity:	0	TITLE19:	0			PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	01/23/2018		
County	TOM GREEN			Reg Svcs:	ICF/IID		Region	09 - ABILENE	
Facility Information:		Facility ID:	007401		<u>Owner Information</u>				
CAPITAL HEIGHTS HOME					D & S RESIDENTIAL SERVICES LP				
1706 IDAHO					8911 N CAPITAL OF TX HWY				
SAN ANGELO		TX	76904					,BLDG 1 STE 1300	
Phone	(325) 944-4096	Fax	(512) 327-5355					78759	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PHONE:	(512) 327-2325	FAX:	(512) 327-5355
Cert Alzh Capacity:	0	TITLE19:	0			PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	12/01/2017		
County	TOM GREEN			Reg Svcs:	ICF/IID		Region	09 - ABILENE	
Facility Information:		Facility ID:	007235		<u>Owner Information</u>				
CASA DE CONCHO					D & S RESIDENTIAL SERVICES LP				
2706 WATSON					8911 N CAPITAL OF TX HWY				
SAN ANGELO		TX	76903					,BLDG 1 STE 1300	
Phone	(325) 658-1957	Fax	(512) 327-5355					78759	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PHONE:	(512) 327-2325	FAX:	(512) 327-5355
Cert Alzh Capacity:	0	TITLE19:	0			PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	12/01/2017		
County	TOM GREEN			Reg Svcs:	ICF/IID		Region	09 - ABILENE	
Facility Information:		Facility ID:	003632		<u>Owner Information</u>				
CASA DE MIMOSA					D & S RESIDENTIAL SERVICES LP				
1041 E 44TH ST					8911 N CAPITAL OF TX HWY				
SAN ANGELO		TX	76903					,BLDG 1 STE 1300	
Phone	(325) 653-5962	Fax	(512) 327-5355					78759	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PHONE:	(512) 327-2325	FAX:	(512) 327-5355
Cert Alzh Capacity:	0	TITLE19:	0			PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	01/07/2018		
County	TOM GREEN			Reg Svcs:	ICF/IID		Region	09 - ABILENE	
Facility Information:		Facility ID:	003609		<u>Owner Information</u>				
CASA DE TRES RIOS					D & S RESIDENTIAL SERVICES LP				
1342 TRES RIOS					8911 N CAPITAL OF TX HWY				
SAN ANGELO		TX	76903					,BLDG 1 STE 1300	
Phone	(325) 651-6723	Fax	(512) 327-5355					78759	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PHONE:	(512) 327-2325	FAX:	(512) 327-5355
Cert Alzh Capacity:	0	TITLE19:	0			PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	12/01/2017		



County	TOM GREEN			Reg Svcs:	ICF/IID		Region	09 - ABILENE	
Facility Information:		Facility ID:	007582		<u>Owner Information</u>				
D&S TERRACE PLACE					D & S RESIDENTIAL SERVICES LP				
42 TERRACE DR					8911 N CAPITAL OF TX HWY				
SAN ANGELO		TX	76905				,BLDG 1 STE 1300		
Phone	(325) 651-9383	Fax	(512) 327-5355				AUSTIN TX 78759		
TOTAL Lic Capacity:	0	TITLE 18:	0		ICF/IID: 6		PHONE:	(512) 327-2325	FAX: (512) 327-5355
Cert Alzh Capacity:	0	TITLE19:	0				PROGRAM TYPE:	ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0				License Exp Dt:	12/01/2017	
County	TOM GREEN			Reg Svcs:	ICF/IID		Region	09 - ABILENE	
Facility Information:		Facility ID:	003995		<u>Owner Information</u>				
MOSAIC					MOSAIC				
3841 HONEYSUCKLE					428 ST ANDREWS DR				
SAN ANGELO		TX	76904				ALLEN TX 75002		
Phone	(325) 651-3333	Fax	(325) 651-8110				PHONE:	(469) 675-1561	FAX: (469) 675-1562
TOTAL Lic Capacity:	0	TITLE 18:	0		ICF/IID: 6		PROGRAM TYPE:	ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0				License Exp Dt:	01/01/2017	
PRIVATE Beds:	0	TITLE 18/19:	0						
County	TOM GREEN			Reg Svcs:	ICF/IID		Region	09 - ABILENE	
Facility Information:		Facility ID:	003889		<u>Owner Information</u>				
MOSAIC					MOSAIC				
4801 BERMUDA					428 ST ANDREWS DR				
SAN ANGELO		TX	76904				ALLEN TX 75002		
Phone	(325) 651-3333	Fax	(325) 651-8110				PHONE:	(469) 675-1561	FAX: (469) 675-1562
TOTAL Lic Capacity:	0	TITLE 18:	0		ICF/IID: 6		PROGRAM TYPE:	ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0				License Exp Dt:	01/01/2017	
PRIVATE Beds:	0	TITLE 18/19:	0						
County	TOM GREEN			Reg Svcs:	ICF/IID		Region	09 - ABILENE	
Facility Information:		Facility ID:	003945		<u>Owner Information</u>				
MOSAIC					MOSAIC				
2742 PALO DURO					428 ST ANDREWS DR				
SAN ANGELO		TX	76904				ALLEN TX 75002		
Phone	(325) 651-3333	Fax	(325) 651-8110				PHONE:	(469) 675-1561	FAX: (469) 675-1562
TOTAL Lic Capacity:	0	TITLE 18:	0		ICF/IID: 6		PROGRAM TYPE:	ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0				License Exp Dt:	01/01/2017	
PRIVATE Beds:	0	TITLE 18/19:	0						
County	TOM GREEN			Reg Svcs:	ICF/IID		Region	09 - ABILENE	
Facility Information:		Facility ID:	003916		<u>Owner Information</u>				
MOSAIC					MOSAIC				
165 EDINBURGH					428 ST ANDREWS DR				
SAN ANGELO		TX	76904				ALLEN TX 75002		
Phone	(325) 651-3333	Fax	(325) 651-8110				PHONE:	(469) 675-1561	FAX: (469) 675-1562
TOTAL Lic Capacity:	0	TITLE 18:	0		ICF/IID: 6		PROGRAM TYPE:	ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0				License Exp Dt:	04/30/2018	
PRIVATE Beds:	0	TITLE 18/19:	0						
County	TOM GREEN			Reg Svcs:	ICF/IID		Region	09 - ABILENE	
Facility Information:		Facility ID:	007338		<u>Owner Information</u>				
MOSAIC					MOSAIC				
4829 BERMUDA					428 ST ANDREWS DR				
SAN ANGELO		TX	76904				ALLEN TX 75002		
Phone	(325) 651-3333	Fax	(325) 651-8110				PHONE:	(469) 675-1561	FAX: (469) 675-1562
TOTAL Lic Capacity:	0	TITLE 18:	0		ICF/IID: 4		PROGRAM TYPE:	ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0				License Exp Dt:	01/01/2017	
PRIVATE Beds:	0	TITLE 18/19:	0						

County	TOM GREEN			Reg Svcs:	ICF/IID		Region	09 - ABILENE	
Facility Information:		Facility ID:		003923		<u>Owner Information</u>			
MOSAIC						MOSAIC			
3221 SOUTHLAND						428 ST ANDREWS DR			
SAN ANGELO		TX	76904			ALLEN	TX	75002	
Phone	(325) 651-3333	Fax	(325) 651-8110			PHONE:	(469) 675-1561	FAX:	(469) 675-1562
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:	01/01/2017		
PRIVATE Beds:	0	TITLE 18/19:	0						
County	TOM GREEN			Reg Svcs:	ICF/IID		Region	09 - ABILENE	
Facility Information:		Facility ID:		003606		<u>Owner Information</u>			
MOSAIC						MOSAIC			
3217 CLEARVIEW						428 ST ANDREWS DR			
SAN ANGELO		TX	76904			ALLEN	TX	75002	
Phone	(325) 651-3333	Fax	(325) 651-8110			PHONE:	(469) 675-1561	FAX:	(469) 675-1562
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:	01/01/2017		
PRIVATE Beds:	0	TITLE 18/19:	0						
County	TOM GREEN			Reg Svcs:	ICF/IID		Region	09 - ABILENE	
Facility Information:		Facility ID:		007339		<u>Owner Information</u>			
MOSAIC						MOSAIC			
3613 WILDEWOOD						428 ST ANDREWS DR			
SAN ANGELO		TX	76904			ALLEN	TX	75002	
Phone	(325) 651-3333	Fax	(325) 651-8110			PHONE:	(469) 675-1561	FAX:	(469) 675-1562
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:	01/01/2017		
PRIVATE Beds:	0	TITLE 18/19:	0						
County	TOM GREEN			Reg Svcs:	ICF/IID		Region	09 - ABILENE	
Facility Information:		Facility ID:		007656		<u>Owner Information</u>			
SAN ANGELO INDEPENDENT LIVING TRAINING RESIDENCE						THE INSTITUTE OF COGNITIVE DEVELOP, INC			
20 S KOENIGHEIM						PO BOX 5018			
SAN ANGELO		TX	76903			SAN ANGELO	TX	76902	
Phone	(325) 655-3884	Fax	(325) 658-8441			PHONE:	(325) 658-8631	FAX:	(325) 659-2070
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 13		PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:	01/22/2018		
PRIVATE Beds:	0	TITLE 18/19:	0						
County	TRAVIS			Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:		003646		<u>Owner Information</u>			
ALDWYCHE						PREMIEANT INCORPORATED			
5444 FAIRMONT CIR						1110 W WILLIAM CANNON			
AUSTIN		TX	78745			,BLDG 2			
Phone	(512) 916-1632	Fax	(512) 916-1639			AUSTIN	TX	78745	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 6		PHONE:	(512) 916-1632	FAX:	(512) 916-1639
Cert Alzh Capacity:	0	TITLE19:	0			PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0			License Exp Dt:	01/01/2018		
County	TRAVIS			Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:		003752		<u>Owner Information</u>			
ALLANDALE						EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
6110 A BULLARD DR						9901 LINN STATION RD			
AUSTIN		TX	78731			LOUISVILLE		KY	40223
Phone	(512) 451-5801	Fax				PHONE:	(502) 394-2100	FAX:	(502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID: 12		PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0			License Exp Dt:	10/01/2018		
PRIVATE Beds:	0	TITLE 18/19:	0						

County	TRAVIS		Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
<b>Facility Information:</b>	<b>Facility ID:</b>	007249	<b>Owner Information</b>					
AUSTIN HOUSE			PREMIEANT INCORPORATED					
101 CLOUDVIEW DR			1110 W WILLIAM CANNON				BLDG 2	
AUSTIN	TX	78745	AUSTIN TX				78745	
<b>Phone</b>	(512) 916-1632	<b>Fax</b>	(512) 916-1639	<b>PHONE:</b>		(512) 916-1632	<b>FAX:</b>	(512) 916-1639
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>		6	<b>PROGRAM TYPE:</b>	ICF/IID
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>License Exp Dt:</b>		01/27/2018	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	TRAVIS		Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
<b>Facility Information:</b>	<b>Facility ID:</b>	007101	<b>Owner Information</b>					
AUSTIN STATE SUPPORTED LIVING CENTER			DADS					
2203 W 35TH ST			PO BOX 12668					
AUSTIN	TX	78767	AUSTIN TX				78711	
<b>Phone</b>	(512) 454-4731	<b>Fax</b>	(512) 374-6145	<b>PHONE:</b>		(512) 454-3761	<b>FAX:</b>	
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>		474	<b>PROGRAM TYPE:</b>	ICF/IID
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>License Exp Dt:</b>			<b>SERVICE TYPE</b>	STATE SCHOOL/STATE CENTER
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	TRAVIS		Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
<b>Facility Information:</b>	<b>Facility ID:</b>	007389	<b>Owner Information</b>					
AUTUMN RIDGE			EDUCARE COMMUNITY LIVING CORPORATION - TEXAS					
11605 AUTUMN RIDGE			9901 LINN STATION RD					
AUSTIN	TX	78759	LOUISVILLE KY				40223	
<b>Phone</b>	(512) 331-0445	<b>Fax</b>		<b>PHONE:</b>		(502) 394-2100	<b>FAX:</b>	(502) 394-2285
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>		6	<b>PROGRAM TYPE:</b>	ICF/IID
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>License Exp Dt:</b>		10/01/2018	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	TRAVIS		Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
<b>Facility Information:</b>	<b>Facility ID:</b>	007367	<b>Owner Information</b>					
BALCONES WOODS			EDUCARE COMMUNITY LIVING CORPORATION - TEXAS					
4504 BALCONES WOODS			9901 LINN STATION RD					
AUSTIN	TX	78759	LOUISVILLE KY				40223	
<b>Phone</b>	(512) 345-7256	<b>Fax</b>		<b>PHONE:</b>		(502) 394-2100	<b>FAX:</b>	(502) 394-2285
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>		6	<b>PROGRAM TYPE:</b>	ICF/IID
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>License Exp Dt:</b>		10/01/2018	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	TRAVIS		Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
<b>Facility Information:</b>	<b>Facility ID:</b>	007599	<b>Owner Information</b>					
BLARWOOD			EDUCARE COMMUNITY LIVING CORPORATION - TEXAS					
6100 BLARWOOD DRIVE			9901 LINN STATION RD					
AUSTIN	TX	78745	LOUISVILLE KY				40223	
<b>Phone</b>	(512) 916-9451	<b>Fax</b>	(512) 323-6031	<b>PHONE:</b>		(502) 394-2100	<b>FAX:</b>	(502) 394-2285
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>		6	<b>PROGRAM TYPE:</b>	ICF/IID
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>License Exp Dt:</b>		11/01/2017	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	TRAVIS		Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
<b>Facility Information:</b>	<b>Facility ID:</b>	003621	<b>Owner Information</b>					
BLUFF CANYON COMMUNITY RESIDENCE			KENMAR RESIDENTIAL SERVICES INCORPORATED					
11101 BLUFF CANYON			33 CYPRESS BLVD				SUITE 100	
AUSTIN	TX	78754	ROUND ROCK TX				78665	
<b>Phone</b>	(512) 339-8016	<b>Fax</b>		<b>PHONE:</b>		(512) 336-0800	<b>FAX:</b>	(512) 336-0812
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>		6	<b>PROGRAM TYPE:</b>	ICF/IID
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>License Exp Dt:</b>		03/15/2018	<b>SERVICE TYPE</b>	PRIVATELY OWNED
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					

County	TRAVIS		Reg Svcs:		IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007312		<u>Owner Information</u>				
BOWIE HOUSE				PREMIEANT INCORPORATED					
6900 WHISPERING OAKS DR						1110 W WILLIAM CANNON		,BLDG 2	
AUSTIN		TX	78745			AUSTIN		TX	78745
Phone	(512) 916-1632	Fax	(512) 916-1639			PHONE:	(512) 916-1632	FAX:	(512) 916-1639
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/27/2018	
County	TRAVIS		Reg Svcs:		IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	003631		<u>Owner Information</u>				
CABANA COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED					
12004 CABANA LN						33 CYPRESS BLVD		,SUITE 100	
AUSTIN		TX	78727			ROUND ROCK		TX	78665
Phone	(512) 339-4074	Fax	(512) 339-6001			PHONE:	(512) 336-0800	FAX:	(512) 336-0812
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		03/15/2018	
County	TRAVIS		Reg Svcs:		IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007483		<u>Owner Information</u>				
CHINATREE COMMUNITY RESIDENCE				D & S RESIDENTIAL SERVICES LP					
8106 U S 290 WEST						8911 N CAPITAL OF TX HWY		,BLDG 1 STE 1300	
AUSTIN		TX	78735			AUSTIN		TX	78759
Phone	(512) 288-0126	Fax	(512) 327-7181			PHONE:	(512) 327-2325	FAX:	(512) 327-5355
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		12/01/2017	
County	TRAVIS		Reg Svcs:		IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007631		<u>Owner Information</u>				
CRAIG DRIVE				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS					
4901 CRAIG DR						9901 LINN STATION RD			
AUSTIN		TX	78727			LOUISVILLE		KY	40223
Phone	(512) 231-0789	Fax				PHONE:	(502) 394-2100	FAX:	(502) 394-2285
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		10/01/2018	
County	TRAVIS		Reg Svcs:		IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	003695		<u>Owner Information</u>				
CROCKETT HOUSE				PREMIEANT INCORPORATED					
7906 BRODIE LN						1110 W WILLIAM CANNON		,BLDG 2	
AUSTIN		TX	78745			AUSTIN		TX	78745
Phone	(512) 916-1632	Fax	(512) 916-1639			PHONE:	(512) 916-1632	FAX:	(512) 916-1639
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		01/27/2018	
County	TRAVIS		Reg Svcs:		IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007379		<u>Owner Information</u>				
DEER TRACK				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS					
12306 DEER TRACK						9901 LINN STATION RD			
AUSTIN		TX	78759			LOUISVILLE		KY	40223
Phone	(512) 257-9616	Fax				PHONE:	(502) 394-2100	FAX:	(502) 394-2285
TOTAL Lic Capacity:		0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:		0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:		0	TITLE 18/19:		0	License Exp Dt:		10/01/2018	

County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:		Facility ID:	007264		<u>Owner Information</u>				
DELAWARE COURT		TX	78758		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				
8604 DELAWARE CT					9901 LINN STATION RD				
AUSTIN					LOUISVILLE KY 40223				
Phone	(512) 832-6277	Fax			PHONE:	(502) 394-2100	FAX:	(502) 394-2285	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0						
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 10/01/2018					
County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:		Facility ID:	007323		<u>Owner Information</u>				
GRACY FARMS		TX	78758		D & S RESIDENTIAL SERVICES LP				
1512 GRACY FARMS LN					8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300				
AUSTIN					AUSTIN TX 78759				
Phone	(512) 832-8964	Fax	(512) 327-5355	ICF/IID:	6	PHONE:	(512) 327-2325	FAX:	(512) 327-5355
TOTAL Lic Capacity:	0	TITLE 18:	0	PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED		
Cert Alzh Capacity:	0	TITLE19:	0						
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 12/01/2017					
County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:		Facility ID:	007429		<u>Owner Information</u>				
GRASSHOPPER		TX	78748		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				
3319 GRASSHOPPER					9901 LINN STATION RD				
AUSTIN					LOUISVILLE KY 40223				
Phone	(512) 280-6833	Fax			PHONE:	(502) 394-2100	FAX:	(502) 394-2285	
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity:	0	TITLE19:	0						
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 11/01/2017					
County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:		Facility ID:	007475		<u>Owner Information</u>				
HOUSTON HOUSE		TX	78745		PREMIEANT INCORPORATED				
7509 WESTGATE BLVD					1110 W WILLIAM CANNON ,BLDG 2				
AUSTIN					AUSTIN TX 78745				
Phone	(512) 916-1632	Fax	(512) 916-1639	ICF/IID:	6	PHONE:	(512) 916-1632	FAX:	(512) 916-1639
TOTAL Lic Capacity:	0	TITLE 18:	0	PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED		
Cert Alzh Capacity:	0	TITLE19:	0						
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 01/27/2018					
County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:		Facility ID:	007805		<u>Owner Information</u>				
KEOTA		TX	78749		D & S RESIDENTIAL SERVICES LP				
4508 KEOTA DR					8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300				
AUSTIN					AUSTIN TX 78759				
Phone	(512) 280-9135	Fax	(512) 327-5355	ICF/IID:	6	PHONE:	(512) 327-2325	FAX:	(512) 327-5355
TOTAL Lic Capacity:	0	TITLE 18:	0	PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED		
Cert Alzh Capacity:	0	TITLE19:	0						
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 12/01/2017					
County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:		Facility ID:	007452		<u>Owner Information</u>				
LINCOLN HOUSE		TX	78753		AUSTIN HEALTH RESOURCES INC				
1007 COLLINGSWORTH DR					9609 NEW FOUNDLAND CIRCLE				
AUSTIN					AUSTIN TX 78758				
Phone	(512) 835-8955	Fax	(512) 835-8812	ICF/IID:	6	PHONE:	(512) 835-8955	FAX:	(512) 895-8812
TOTAL Lic Capacity:	0	TITLE 18:	0	PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED		
Cert Alzh Capacity:	0	TITLE19:	0						
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt: 06/01/2018					

County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>		<b>Facility ID:</b> 003793	<b>Owner Information</b>		
MARY LEE FOUNDATION SOUTHPOINTE I			MARY LEE FOUNDATION		
1338 LAMAR SQUARE DR			1339 LAMAR SQUARE DR		
AUSTIN		TX 78704	AUSTIN TX 78704		
<b>Phone</b>	(512) 442-6077	<b>Fax</b>	(512) 442-6825	<b>PHONE:</b>	(512) 443-5777
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	13
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
			<b>License Exp Dt:</b>	11/03/2017	
County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>		<b>Facility ID:</b> 003832	<b>Owner Information</b>		
MARY LEE FOUNDATION SOUTHPOINTE I I			MARY LEE FOUNDATION		
1336 LAMAR SQUARE DR			1339 LAMAR SQUARE DR		
AUSTIN		TX 78704	AUSTIN TX 78704		
<b>Phone</b>	(512) 442-6077	<b>Fax</b>	(512) 442-6825	<b>PHONE:</b>	(512) 443-5777
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	13
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
			<b>License Exp Dt:</b>	11/03/2017	
County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>		<b>Facility ID:</b> 007242	<b>Owner Information</b>		
MARYWOOD			PREMIEANT INCORPORATED		
4700 GANYMEDE LN			1110 W WILLIAM CANNON ,BLDG 2		
AUSTIN		TX 78727	AUSTIN TX 78745		
<b>Phone</b>	(512) 916-1632	<b>Fax</b>	(512) 916-1639	<b>PHONE:</b>	(512) 916-1632
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
			<b>License Exp Dt:</b>	01/01/2018	
County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>		<b>Facility ID:</b> 007627	<b>Owner Information</b>		
OAKTREE COMMUNITY RESIDENCE			D & S RESIDENTIAL SERVICES LP		
3509 CONVICT HILL RD			8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300		
AUSTIN		TX 78745	AUSTIN TX 78759		
<b>Phone</b>	(512) 892-1084	<b>Fax</b>	(512) 327-7181	<b>PHONE:</b>	(512) 327-2325
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
			<b>License Exp Dt:</b>	12/31/2017	
County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>		<b>Facility ID:</b> 003663	<b>Owner Information</b>		
PARKFIELD			PREMIEANT INCORPORATED		
9202 PARKFIELD DR			1110 W WILLIAM CANNON ,BLDG 2		
AUSTIN		TX 78758	AUSTIN TX 78745		
<b>Phone</b>	(512) 916-1632	<b>Fax</b>	(512) 916-1639	<b>PHONE:</b>	(512) 916-1632
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
			<b>License Exp Dt:</b>	01/01/2018	
County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>		<b>Facility ID:</b> 003661	<b>Owner Information</b>		
PENDLETON			PREMIEANT INCORPORATED		
1304 QUAIL PARK DR			1110 W WILLIAM CANNON ,BLDG 2		
AUSTIN		TX 78758	AUSTIN TX 78745		
<b>Phone</b>	(512) 916-1632	<b>Fax</b>	(512) 916-1639	<b>PHONE:</b>	(512) 916-1632
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
			<b>License Exp Dt:</b>	05/02/2017	

County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007545		Owner Information		
PILGRIMS PLACE				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
8204 PILGRIMS PL				9901 LINN STATION RD			
AUSTIN		TX	78759	LOUISVILLE		KY	40223
Phone	(512) 918-2094	Fax			PHONE:	(502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6		
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		10/01/2018	

County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007804		Owner Information		
PINE KNOLL				PREMIEANT INCORPORATED			
1400 PINE KNOLL DR				1110 W WILLIAM CANNON			
AUSTIN		TX	78758	AUSTIN		TX	,BLDG 2 78745
Phone	(512) 916-1632	Fax	(512) 916-1639	PHONE:	(512) 916-1632	FAX:	(512) 916-1639
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6		
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		01/01/2018	

County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007320		Owner Information		
RED OAK				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
3902 SIERRA				9901 LINN STATION RD			
AUSTIN		TX	78731	LOUISVILLE		KY	40223
Phone	(512) 346-1410	Fax			PHONE:	(502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6		
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		10/01/2018	

County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007611		Owner Information		
ROSS HOUSE				PREMIEANT INCORPORATED			
3215 WESTERN DR				1110 W WILLIAM CANNON			
AUSTIN		TX	78745	AUSTIN		TX	,BLDG 2 78745
Phone	(512) 916-1632	Fax	(512) 916-1639	PHONE:	(512) 916-1632	FAX:	(512) 916-1639
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6		
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		01/27/2018	

County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	102153		Owner Information		
SALEM MEADOW				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
1402 SALEM MEADOW CIRCLE				9901 LINN STATION RD			
AUSTIN		TX	78745	LOUISVILLE		KY	40223
Phone	(512) 326-4828	Fax			PHONE:	(502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6		
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		11/01/2017	

County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007231		Owner Information		
SHADY HOLLOW				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
11403 BOOT HILL				9901 LINN STATION RD			
AUSTIN		TX	78748	LOUISVILLE		KY	40223
Phone	(512) 282-8777	Fax	(512) 892-2524	PHONE:	(502) 394-2100	FAX:	(502) 394-2285
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6		
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		11/01/2017	

County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>	<b>Facility ID:</b> 003658	<b>Owner Information</b>			
SILVERWAY		PREMIEANT INCORPORATED			
7303 DAUGHERTY		1110 W WILLIAM CANNON			
AUSTIN	TX 78758	,BLDG 2			
<b>Phone</b> (512) 916-1632	<b>Fax</b> (512) 916-1639	AUSTIN TX 78745			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (512) 916-1632	<b>FAX:</b> (512) 916-1639	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 01/01/2018		
County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>	<b>Facility ID:</b> 007418	<b>Owner Information</b>			
THE COTTAGE		MARY LEE FOUNDATION			
1334 LAMAR SQUARE DR		1339 LAMAR SQUARE DR			
AUSTIN	TX 78704	AUSTIN TX 78704			
<b>Phone</b> (512) 442-6077	<b>Fax</b> (512) 442-6825				
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (512) 443-5777	<b>FAX:</b> (512) 443-5807	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 08/10/2017		
County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>	<b>Facility ID:</b> 003639	<b>Owner Information</b>			
TRAVIS HOUSE		PREMIEANT INCORPORATED			
9112 JAPONICA CT		1110 W WILLIAM CANNON			
AUSTIN	TX 78748	,BLDG 2			
<b>Phone</b> (512) 916-1632	<b>Fax</b> (512) 916-1639	AUSTIN TX 78745			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (512) 916-1632	<b>FAX:</b> (512) 916-1639	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 01/27/2018		
County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>	<b>Facility ID:</b> 003647	<b>Owner Information</b>			
WAGON CROSSING		PREMIEANT INCORPORATED			
1203 ECHO LN		1110 W WILLIAM CANNON			
AUSTIN	TX 78745	,BLDG 2			
<b>Phone</b> (512) 916-1632	<b>Fax</b> (512) 916-1639	AUSTIN TX 78745			
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (512) 916-1632	<b>FAX:</b> (512) 916-1639	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 04/03/2017		
County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>	<b>Facility ID:</b> 102416	<b>Owner Information</b>			
WESTGATE		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
7906 APPOMATTOX DR		9901 LINN STATION RD			
AUSTIN	TX 78745	LOUISVILLE KY 40223			
<b>Phone</b> (512) 448-1194	<b>Fax</b>				
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (502) 394-2100	<b>FAX:</b> (502) 394-2285	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 11/01/2017		
County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
<b>Facility Information:</b>	<b>Facility ID:</b> 007274	<b>Owner Information</b>			
WHISTLESTOP		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
7507 WHISTLESTOP		9901 LINN STATION RD			
AUSTIN	TX 78749	LOUISVILLE KY 40223			
<b>Phone</b> (512) 288-5060	<b>Fax</b>				
<b>TOTAL Lic Capacity:</b> 0	<b>TITLE 18:</b> 0	<b>ICF/IID:</b> 6	<b>PHONE:</b> (502) 394-2100	<b>FAX:</b> (502) 394-2285	
<b>Cert Alzh Capacity:</b> 0	<b>TITLE19:</b> 0		<b>PROGRAM TYPE:</b> ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED	
<b>PRIVATE Beds:</b> 0	<b>TITLE 18/19:</b> 0		<b>License Exp Dt:</b> 11/01/2017		



County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID:	007609	<u>Owner Information</u>		
WILLIAMS HOUSE			PREMIEANT INCORPORATED		
5908 WESTGATE BLVD			1110 W WILLIAM CANNON		
AUSTIN	TX	78745		,BLDG 2	
Phone	(512) 916-1632	Fax	(512) 916-1639	AUSTIN	TX 78745
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PHONE:	(512) 916-1632
PRIVATE Beds:	0	TITLE 18/19:	0	FAX:	(512) 916-1639
				PROGRAM TYPE:	ICF/IID
				SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	01/27/2018
County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID:	003974	<u>Owner Information</u>		
PFLUGERVILLE COMMUNITY HOME			EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP		
514 OAT MEADOW DRIVE			9901 LINN STATION ROAD		
PFLUGERVILLE	TX	78660-4347			
Phone	(512) 251-0427	Fax	(713) 622-9141	LOUISVILLE	KY 40223-3808
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(502) 394-2100
Cert Alzh Capacity:	0	TITLE19:	0	FAX:	(502) 394-2285
PRIVATE Beds:	0	TITLE 18/19:	0	PROGRAM TYPE:	ICF/IID
				SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	01/01/2017
County	TRAVIS	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID:	007633	<u>Owner Information</u>		
WILDRIDGE			EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		
904 VICTORIA RIDGE			9901 LINN STATION RD		
PFLUGERVILLE	TX	78660			
Phone	(512) 251-4956	Fax		LOUISVILLE	KY 40223
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(502) 394-2100
Cert Alzh Capacity:	0	TITLE19:	0	FAX:	(502) 394-2285
PRIVATE Beds:	0	TITLE 18/19:	0	PROGRAM TYPE:	ICF/IID
				SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	03/01/2018
County	UPSHUR	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID:	007293	<u>Owner Information</u>		
WOODBINE COMMUNITY HOME			D & S RESIDENTIAL SERVICES LP		
2402 WOODBINE			8911 N CAPITAL OF TX HWY		
GLADEWATER	TX	75647		,BLDG 1	STE 1300
Phone	(903) 845-4660	Fax		AUSTIN	TX 78759
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(512) 327-2325
Cert Alzh Capacity:	0	TITLE19:	0	FAX:	(512) 327-5355
PRIVATE Beds:	0	TITLE 18/19:	0	PROGRAM TYPE:	ICF/IID
				SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	12/01/2017
County	UVALDE	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID:	007343	<u>Owner Information</u>		
DOROTHY JO COMMUNITY HOME			EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP		
625 DOROTHY JO CIR			9901 LINN STATION ROAD		
UVALDE	TX	78801-4434			
Phone	(830) 278-1905	Fax		LOUISVILLE	KY 40223-3808
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(502) 394-2100
Cert Alzh Capacity:	0	TITLE19:	0	FAX:	(502) 394-2285
PRIVATE Beds:	0	TITLE 18/19:	0	PROGRAM TYPE:	ICF/IID
				SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	01/01/2017
County	UVALDE	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID:	007500	<u>Owner Information</u>		
NOPAL COMMUNITY HOME			EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP		
802 E NOPAL ST			9901 LINN STATION ROAD		
UVALDE	TX	78801-5400			
Phone	(830) 278-6958	Fax		LOUISVILLE	KY 40223-3808
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(502) 394-2100
Cert Alzh Capacity:	0	TITLE19:	0	FAX:	(502) 394-2285
PRIVATE Beds:	0	TITLE 18/19:	0	PROGRAM TYPE:	ICF/IID
				SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	01/01/2017

County	VAL VERDE	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	007290	<b>Owner Information</b>	
JOHN GLENN COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
110 JOHN GLENN DR				9901 LINN STATION ROAD	
DEL RIO		<b>TX</b>	78840-2315	LOUISVILLE KY 40223-3808	
<b>Phone</b>	(830) 774-3904	<b>Fax</b>		<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2017
County	VAL VERDE	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	007237	<b>Owner Information</b>	
MICHELLE COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
93 MICHELLE DR				9901 LINN STATION ROAD	
DEL RIO		<b>TX</b>	78840-2621	LOUISVILLE KY 40223-3808	
<b>Phone</b>	(830) 775-9594	<b>Fax</b>		<b>PHONE:</b>	(502) 394-2100
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	PRIVATELY OWNED
				<b>License Exp Dt:</b>	01/01/2019
County	VAN ZANDT	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
<b>Facility Information:</b>		<b>Facility ID:</b>	003841	<b>Owner Information</b>	
CANTON GROUP HOME MILLCREEK FEMALES				ANDREWS CENTER	
1611 MILLCREEK				2323 W FRONT ST	
CANTON		<b>TX</b>	75103	TYLER TX 75702	
<b>Phone</b>	(903) 567-4526	<b>Fax</b>		<b>PHONE:</b>	(903) 567-1351
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	8
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	GOVERNMENT BASED
				<b>License Exp Dt:</b>	
County	VAN ZANDT	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
<b>Facility Information:</b>		<b>Facility ID:</b>	003772	<b>Owner Information</b>	
ELLIOTT DRIVE GROUP HOME				ANDREWS CENTER	
1738 ELLIOTT DR				2323 W FRONT ST	
CANTON		<b>TX</b>	75103	TYLER TX 75702	
<b>Phone</b>	(903) 567-4541	<b>Fax</b>		<b>PHONE:</b>	(903) 567-1351
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	10
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	GOVERNMENT BASED
				<b>License Exp Dt:</b>	
County	VICTORIA	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	003938	<b>Owner Information</b>	
EDINBURGH HOME				UCG CENTRAL TEXAS HOLDINGS LLC	
306 EDINBURGH				750 RUSK	
VICTORIA		<b>TX</b>	77904	NEW BRAUNFELS TX 78130	
<b>Phone</b>	(512) 578-2940	<b>Fax</b>		<b>PHONE:</b>	(830) 372-2920
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	GOVERNMENT BASED
				<b>License Exp Dt:</b>	03/01/2018
County	VICTORIA	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
<b>Facility Information:</b>		<b>Facility ID:</b>	007304	<b>Owner Information</b>	
NORTHCREST GROUP HOME				UCG CENTRAL TEXAS HOLDINGS LLC	
902 BELLEVUE				750 RUSK	
VICTORIA		<b>TX</b>	77904	NEW BRAUNFELS TX 78130	
<b>Phone</b>	(512) 578-1527	<b>Fax</b>		<b>PHONE:</b>	(830) 372-2920
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0	<b>PROGRAM TYPE:</b>	ICF/IID
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0	<b>SERVICE TYPE</b>	GOVERNMENT BASED
				<b>License Exp Dt:</b>	03/01/2018

County	VICTORIA	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003926	Owner Information			
VICTORIA GROUP HOME		UCG CENTRAL TEXAS HOLDINGS LLC			
2006 N WHEELER		750 RUSK			
VICTORIA	TX 77901	NEW BRAUNFELS TX 78130			
Phone (512) 575-1558	Fax	PHONE: (830) 372-2920 FAX: (214) 723-5331			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				
County	WALKER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007504	Owner Information			
HUNTSVILLE HOUSE		TRI COUNTY MHMR SERVICES			
63 STATE HWY 75 N		PO BOX 3067			
HUNTSVILLE	TX 77340	CONROE TX 77305			
Phone (409) 760-2008	Fax	PHONE: FAX:			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt:			
PRIVATE Beds: 0	TITLE 18/19: 0				
County	WALLER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 105801	Owner Information			
WILLOW RIVER FARMS - #12		THE CENTER SERVING PERSONS WITH MENTAL RETARDATION			
4073 FM 3318		3550 WEST DALLAS			
BROOKSHIRE	TX 77423	HOUSTON TX 77019			
Phone (713) 525-8300	Fax (979) 885-1007	PHONE: (713) 525-8400 FAX: (713) 525-8334			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/18/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				
County	WALLER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 105802	Owner Information			
WILLOW RIVER FARMS - #4		THE CENTER SERVING PERSONS WITH MENTAL RETARDATION			
4073 FM 3318		3550 WEST DALLAS			
BROOKSHIRE	TX 77423	HOUSTON TX 77019			
Phone (713) 525-8300	Fax (979) 885-1007	PHONE: (713) 525-8400 FAX: (713) 525-8334			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/18/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				
County	WALLER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 103355	Owner Information			
WILLOW RIVER FARMS (1B)		THE CENTER SERVING PERSONS WITH MENTAL RETARDATION			
4073 FM 3318 - 1B		3550 WEST DALLAS			
BROOKSHIRE	TX 77423	HOUSTON TX 77019			
Phone (713) 525-8300	Fax (979) 885-1007	PHONE: (713) 525-8400 FAX: (713) 525-8334			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 5	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/11/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				
County	WALLER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 103354	Owner Information			
WILLOW RIVER FARMS (1A)		THE CENTER SERVING PERSONS WITH MENTAL RETARDATION			
4073 FM 3318 - 1A		3550 WEST DALLAS			
BROOKSHIRE	TX 77423	HOUSTON TX 77019			
Phone (979) 885-1007	Fax (979) 885-1007	PHONE: (713) 525-8400 FAX: (713) 525-8334			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 4	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/11/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WALLER		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
Facility Information:		Facility ID:	103357		<u>Owner Information</u>			
WILLOW RIVER FARMS (5A)				THE CENTER SERVING PERSONS WITH MENTAL RETARDATION				
4073 FM 3318 - 5A				3550 WEST DALLAS				
BROOKSHIRE		TX	77423			HOUSTON	TX	77019
Phone	(713) 525-8300	Fax	(979) 885-1007			PHONE:	(713) 525-8400	FAX: (713) 525-8334
TOTAL Lic Capacity: 0		TITLE 18: 0		ICF/IID: 5		PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0		TITLE19: 0				SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds: 0		TITLE 18/19: 0				License Exp Dt: 04/10/2018		
County	WALLER		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
Facility Information:		Facility ID:	103356		<u>Owner Information</u>			
WILLOW RIVER FARMS (5B)				THE CENTER SERVING PERSONS WITH MENTAL RETARDATION				
4073 FM 3318 - 5B				3550 WEST DALLAS				
BROOKSHIRE		TX	77423			HOUSTON	TX	77019
Phone	(713) 525-8300	Fax	(979) 885-1007			PHONE:	(713) 525-8400	FAX: (713) 525-8334
TOTAL Lic Capacity: 0		TITLE 18: 0		ICF/IID: 5		PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0		TITLE19: 0				SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds: 0		TITLE 18/19: 0				License Exp Dt: 04/10/2018		
County	WALLER		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
Facility Information:		Facility ID:	101330		<u>Owner Information</u>			
WILLOW RIVER FARMS 10				THE CENTER SERVING PERSONS WITH MENTAL RETARDATION				
4073 FM 3318				3550 WEST DALLAS				
BROOKSHIRE		TX	77423			HOUSTON	TX	77019
Phone	(713) 525-8300	Fax	(979) 885-1007			PHONE:	(713) 525-8400	FAX: (713) 525-8334
TOTAL Lic Capacity: 0		TITLE 18: 0		ICF/IID: 6		PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0		TITLE19: 0				SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds: 0		TITLE 18/19: 0				License Exp Dt: 03/11/2017		
County	WALLER		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
Facility Information:		Facility ID:	101331		<u>Owner Information</u>			
WILLOW RIVER FARMS 11				THE CENTER SERVING PERSONS WITH MENTAL RETARDATION				
4073 FM 3318				3550 WEST DALLAS				
BROOKSHIRE		TX	77423			HOUSTON	TX	77019
Phone	(713) 525-8300	Fax	(979) 885-1007			PHONE:	(713) 525-8400	FAX: (713) 525-8334
TOTAL Lic Capacity: 0		TITLE 18: 0		ICF/IID: 6		PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0		TITLE19: 0				SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds: 0		TITLE 18/19: 0				License Exp Dt: 03/12/2017		
County	WASHINGTON		Reg Svcs:	UNIT 21 (ICF/MR)		Region	07 - AUSTIN	
Facility Information:		Facility ID:	007110		<u>Owner Information</u>			
BRENNHAM STATE SUPPORTED LIVING CENTER				DADS				
HIGHWAY 36 SOUTH				PO BOX 12668				
BRENNHAM		TX	77833			AUSTIN	TX	78711
Phone	(979) 836-4511	Fax	(979) 277-1865			PHONE:	(512) 454-3761	FAX:
TOTAL Lic Capacity: 0		TITLE 18: 0		ICF/IID: 520		PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0		TITLE19: 0				SERVICE TYPE STATE SCHOOL/STATE CENTER		
PRIVATE Beds: 0		TITLE 18/19: 0				License Exp Dt:		
County	WHARTON		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
Facility Information:		Facility ID:	007820		<u>Owner Information</u>			
EL CAMPO #2				MEMEEHA LLC				
4912 NORTH FM 441 RD				1909 WEST LOOP				
EL CAMPO		TX	77437			EL CAMPO	TX	77437
Phone	(979) 543-4186	Fax	(979) 543-8517			PHONE:	(979) 543-4186	FAX: (979) 543-8517
TOTAL Lic Capacity: 0		TITLE 18: 0		ICF/IID: 6		PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0		TITLE19: 0				SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds: 0		TITLE 18/19: 0				License Exp Dt: 12/01/2017		

County	WHARTON		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
<b>Facility Information:</b>	<b>Facility ID:</b>	007822				<b>Owner Information</b>		
EL CAMPO #3						MEMEEHA LLC		
4200 CR 360						1909 WEST LOOP		
EL CAMPO	<b>TX</b>	77437				EL CAMPO	<b>TX</b>	77437
<b>Phone</b>	(979) 543-4186	<b>Fax</b>	(979) 543-8517			<b>PHONE:</b>	(979) 543-4186	<b>FAX:</b> (979) 543-8517
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	09/22/2018	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	WHARTON		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
<b>Facility Information:</b>	<b>Facility ID:</b>	007819				<b>Owner Information</b>		
EL CAMPO 1						MEMEEHA LLC		
3396 CR 355						1909 WEST LOOP		
EL CAMPO	<b>TX</b>	77437				EL CAMPO	<b>TX</b>	77437
<b>Phone</b>	(979) 543-4186	<b>Fax</b>	(979) 543-8517			<b>PHONE:</b>	(979) 543-4186	<b>FAX:</b> (979) 543-8517
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	12/01/2017	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	WHARTON		Reg Svcs:	UNIT 21 (ICF/MR)		Region	06 - HOUSTON	
<b>Facility Information:</b>	<b>Facility ID:</b>	007821				<b>Owner Information</b>		
EL CAMPO 4						MEMEEHA LLC		
577 C.R. 346						1909 WEST LOOP		
EL CAMPO	<b>TX</b>	77437				EL CAMPO	<b>TX</b>	77437
<b>Phone</b>	(979) 543-4186	<b>Fax</b>	(979) 543-8517			<b>PHONE:</b>	(979) 543-4186	<b>FAX:</b> (979) 543-8517
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	12/01/2017	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	WICHITA		Reg Svcs:	ICF/IID		Region	02 - ABILENE	
<b>Facility Information:</b>	<b>Facility ID:</b>	007392				<b>Owner Information</b>		
MEADOWVIEW GROUP HOME						EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP		
1331 E SYCAMORE DR						9901 LINN STATION ROAD		
BURKBURNETT	<b>TX</b>	76354-3138				LOUISVILLE	<b>KY</b>	40223-3808
<b>Phone</b>	(940) 569-0098	<b>Fax</b>				<b>PHONE:</b>	(502) 394-2100	<b>FAX:</b> (502) 394-2285
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	01/01/2017	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	WICHITA		Reg Svcs:	ICF/IID		Region	02 - ABILENE	
<b>Facility Information:</b>	<b>Facility ID:</b>	007393				<b>Owner Information</b>		
WESTVIEW COMMUNITY HOME						EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP		
1001 PAWHUSKA LN						9901 LINN STATION ROAD		
BURKBURNETT	<b>TX</b>	76354-2825				LOUISVILLE	<b>KY</b>	40223-3808
<b>Phone</b>	(940) 569-2053	<b>Fax</b>	(940) 723-1504			<b>PHONE:</b>	(502) 394-2100	<b>FAX:</b> (502) 394-2285
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	01/01/2017	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					
County	WICHITA		Reg Svcs:	ICF/IID		Region	02 - ABILENE	
<b>Facility Information:</b>	<b>Facility ID:</b>	007390				<b>Owner Information</b>		
CLARA COTTAGE COMMUNITY HOME						EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP		
621 W CLARA AVE						9901 LINN STATION ROAD		
IOWA PARK	<b>TX</b>	76367-1241				LOUISVILLE	<b>KY</b>	40223-3808
<b>Phone</b>	(940) 592-2257	<b>Fax</b>				<b>PHONE:</b>	(502) 394-2100	<b>FAX:</b> (502) 394-2285
<b>TOTAL Lic Capacity:</b>	0	<b>TITLE 18:</b>	0	<b>ICF/IID:</b>	6	<b>PROGRAM TYPE:</b>	ICF/IID	<b>SERVICE TYPE</b> PRIVATELY OWNED
<b>Cert Alzh Capacity:</b>	0	<b>TITLE19:</b>	0			<b>License Exp Dt:</b>	01/01/2017	
<b>PRIVATE Beds:</b>	0	<b>TITLE 18/19:</b>	0					

County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID:	007361	<u>Owner Information</u>		
CUMBERLAND COURT			HIGH PLAINS HEALTH PROVIDERS INC		
2114 8TH ST			1505 P B LN		
WICHITA FALLS	TX	76301	WICHITA FALLS	TX	76302
Phone (940) 322-2948		Fax	PHONE: (940) 766-6751	FAX: (940) 766-6753	
TOTAL Lic Capacity: 0		TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0		TITLE19: 0		License Exp Dt: 04/01/2018	
PRIVATE Beds: 0		TITLE 18/19: 0			
County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID:	007556	<u>Owner Information</u>		
HAMLIN HOUSE			HIGH PLAINS HEALTH PROVIDERS INC		
1509 P B LN			1505 P B LN		
WICHITA FALLS	TX	76302	WICHITA FALLS	TX	76302
Phone (940) 322-8104		Fax (940) 766-6753	PHONE: (940) 766-6751	FAX: (940) 766-6753	
TOTAL Lic Capacity: 0		TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0		TITLE19: 0		License Exp Dt: 08/17/2018	
PRIVATE Beds: 0		TITLE 18/19: 0			
County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID:	003827	<u>Owner Information</u>		
HORIZON HOUSE			HELEN FARABEE CENTER		
1604 ARLINGTON ST			PO BOX 8266		
WICHITA FALLS	TX	76302	WICHITA FALLS	TX	76307
Phone (940) 723-8048		Fax (940) 723-8048	PHONE: (940) 397-3101	FAX: (940) 397-3150	
TOTAL Lic Capacity: 0		TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
Cert Alzh Capacity: 0		TITLE19: 0		License Exp Dt:	
PRIVATE Beds: 0		TITLE 18/19: 0			
County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID:	007360	<u>Owner Information</u>		
MIRAMAR			HIGH PLAINS HEALTH PROVIDERS INC		
2911 AVE L			1505 P B LN		
WICHITA FALLS	TX	76309	WICHITA FALLS	TX	76302
Phone (940) 767-4548		Fax (940) 766-6753	PHONE: (940) 766-6751	FAX: (940) 766-6753	
TOTAL Lic Capacity: 0		TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0		TITLE19: 0		License Exp Dt: 04/01/2018	
PRIVATE Beds: 0		TITLE 18/19: 0			
County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID:	003853	<u>Owner Information</u>		
NORRIS PLACE			HELEN FARABEE CENTER		
1555 NORRIS ST			PO BOX 8266		
WICHITA FALLS	TX	76302	WICHITA FALLS	TX	76307
Phone (940) 397-3362		Fax (940) 397-3388	PHONE: (940) 397-3101	FAX: (940) 397-3150	
TOTAL Lic Capacity: 0		TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
Cert Alzh Capacity: 0		TITLE19: 0		License Exp Dt:	
PRIVATE Beds: 0		TITLE 18/19: 0			
County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID:	003759	<u>Owner Information</u>		
OUACHITA FLATS			D & S RESIDENTIAL SERVICES LP		
6086 KOVARIK RD			8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300		
WICHITA FALLS	TX	76310-1513	AUSTIN	TX	78759
Phone (940) 723-5410		Fax (940) 723-5564	PHONE: (512) 327-2325	FAX: (512) 327-5355	
TOTAL Lic Capacity: 0		TITLE 18: 0	ICF/IID: 13	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0		TITLE19: 0		License Exp Dt: 12/01/2017	
PRIVATE Beds: 0		TITLE 18/19: 0			

County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID:	007426	Owner Information		
SOMERSET HILLS			HIGH PLAINS HEALTH PROVIDERS INC		
4515 LAKEVIEW DR			1505 P B LN		
WICHITA FALLS	TX	76308	WICHITA FALLS	TX	76302
Phone	(940) 691-6704	Fax	(940) 766-6753	PHONE:	(940) 766-6751 FAX: (940) 766-6753
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	07/02/2018	
County	WILLIAMSON	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID:	007538	Owner Information		
GRANT HOUSE			AUSTIN HEALTH RESOURCES INC		
11602 FLINNWOOD CIR			9609 NEW FOUNDLAND CIRCLE		
AUSTIN	TX	78750	AUSTIN	TX	78758
Phone	(512) 331-6970	Fax	(512) 835-8812	PHONE:	(512) 835-8955 FAX: (512) 895-8812
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	06/01/2018	
County	WILLIAMSON	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID:	007310	Owner Information		
CEDAR PARK COMMUNITY RESIDENCE			D & S RESIDENTIAL SERVICES LP		
611 POMEGRANATE PASS			8911 N CAPITAL OF TX HWY		
CEDAR PARK	TX	78613	AUSTIN	TX	,BLDG 1 STE 1300
Phone	(512) 219-1938	Fax	(512) 355-3186		78759
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(512) 327-2325 FAX: (512) 327-5355
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	12/01/2017	
County	WILLIAMSON	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID:	007468	Owner Information		
DRIFTWOOD COMMUNITY HOME			D & S RESIDENTIAL SERVICES LP		
2304 DIJON			8911 N CAPITAL OF TX HWY		
CEDAR PARK	TX	78613	AUSTIN	TX	,BLDG 1 STE 1300
Phone	(512) 327-2325	Fax	(512) 327-5355		78759
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(512) 327-2325 FAX: (512) 327-5355
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	12/01/2017	
County	WILLIAMSON	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID:	003810	Owner Information		
HILL COUNTRY COMMUNITY RESIDENCE			D & S RESIDENTIAL SERVICES LP		
1406 PECAN ST			8911 N CAPITAL OF TX HWY		
CEDAR PARK	TX	78613	AUSTIN	TX	,BLDG 1 STE 1300
Phone	(512) 331-1753	Fax	(512) 327-5355		78759
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(512) 327-2325 FAX: (512) 327-5355
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	12/01/2017	
County	WILLIAMSON	Reg Svcs:	IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID:	003644	Owner Information		
RIVIERA COMMUNITY RESIDENCE			D & S RESIDENTIAL SERVICES LP		
2401 DIJON DR			8911 N CAPITAL OF TX HWY		
CEDAR PARK	TX	78613	AUSTIN	TX	,BLDG 1 STE 1300
Phone	(512) 335-3966	Fax	(512) 327-5355		78759
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(512) 327-2325 FAX: (512) 327-5355
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	12/01/2017	

County	WILLIAMSON			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN			
Facility Information:		Facility ID:		103555		<u>Owner Information</u>						
BARNABAS HOUSE AT DOWN HOME RANCH						DOWN HOME RANCH INC						
20250 FM 619						20250 FM 619						
ELGIN		TX	78621		ELGIN				TX	78621		
Phone	(512) 856-0128		Fax	(512) 856-0256		PHONE:		(512) 856-0128		FAX:	(512) 856-0256	
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6		
Cert Alzh Capacity:		0		TITLE19:		0		PROGRAM TYPE:		ICF/IID		
PRIVATE Beds:		0		TITLE 18/19:		0		License Exp Dt:		12/18/2018		
County	WILLIAMSON			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN			
Facility Information:		Facility ID:		104838		<u>Owner Information</u>						
ISAIAH HOUSE AT DOWN HOME RANCH						DOWN HOME RANCH INC						
20250 FM 619						20250 FM 619						
ELGIN		TX	78621		ELGIN				TX	78621		
Phone	(512) 856-0128		Fax	(512) 856-0256		PHONE:		(512) 856-0128		FAX:	(512) 856-0256	
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6		
Cert Alzh Capacity:		0		TITLE19:		0		PROGRAM TYPE:		ICF/IID		
PRIVATE Beds:		0		TITLE 18/19:		0		License Exp Dt:		08/22/2017		
County	WILLIAMSON			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN			
Facility Information:		Facility ID:		103554		<u>Owner Information</u>						
MARTHA HOUSE AT DOWN HOME RANCH						DOWN HOME RANCH INC						
20250 FM 619						20250 FM 619						
ELGIN		TX	78621		ELGIN				TX	78621		
Phone	(512) 856-0128		Fax	(512) 856-0256		PHONE:		(512) 856-0128		FAX:	(512) 856-0256	
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6		
Cert Alzh Capacity:		0		TITLE19:		0		PROGRAM TYPE:		ICF/IID		
PRIVATE Beds:		0		TITLE 18/19:		0		License Exp Dt:		12/17/2018		
County	WILLIAMSON			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN			
Facility Information:		Facility ID:		103553		<u>Owner Information</u>						
TERESA HOUSE AT DOWN HOME RANCH						DOWN HOME RANCH INC						
20250 FM 619						20250 FM 619						
ELGIN		TX	78621		ELGIN				TX	78621		
Phone	(512) 856-0128		Fax	(512) 856-0256		PHONE:		(512) 856-0128		FAX:	(512) 856-0256	
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		6		
Cert Alzh Capacity:		0		TITLE19:		0		PROGRAM TYPE:		ICF/IID		
PRIVATE Beds:		0		TITLE 18/19:		0		License Exp Dt:		11/05/2018		
County	WILLIAMSON			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN			
Facility Information:		Facility ID:		003784		<u>Owner Information</u>						
ROCK HOUSE OF GEORGETOWN 1						ROCK HOUSE SUPPORT SERVICES INC						
4142 WILLIAMS DR						2252 LINGLEVILLE ROAD HWY 8						
GEORGETOWN		TX	78628		STEPHENVILLE				TX	76401		
Phone	(512) 869-4661		Fax	(512) 869-2176		PHONE:		(254) 968-4004		FAX:	(254) 965-8653	
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		13		
Cert Alzh Capacity:		0		TITLE19:		0		PROGRAM TYPE:		ICF/IID		
PRIVATE Beds:		0		TITLE 18/19:		0		License Exp Dt:		10/01/2018		
County	WILLIAMSON			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN			
Facility Information:		Facility ID:		003813		<u>Owner Information</u>						
ROCK HOUSE OF GEORGETOWN 2						ROCK HOUSE SUPPORT SERVICES INC						
4146 WILLIAMS DR						2252 LINGLEVILLE ROAD HWY 8						
GEORGETOWN		TX	78628		STEPHENVILLE				TX	76401		
Phone	(512) 869-4662		Fax	(512) 869-2176		PHONE:		(254) 968-4004		FAX:	(254) 965-8653	
TOTAL Lic Capacity:		0		TITLE 18:		0		ICF/IID:		13		
Cert Alzh Capacity:		0		TITLE19:		0		PROGRAM TYPE:		ICF/IID		
PRIVATE Beds:		0		TITLE 18/19:		0		License Exp Dt:		10/01/2018		



County	WILLIAMSON			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:				Facility ID:	007430		<u>Owner Information</u>				
SUMMER HOUSE II						ROCK HOUSE SUPPORT SERVICES INC					
208 MESA DR						2252 LINGLEVILLE ROAD HWY 8					
GEORGETOWN				TX	78628				76401		
Phone	(512) 869-0212			Fax	(512) 869-2176						
TOTAL Lic Capacity:				0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:				0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	
PRIVATE Beds:				0	TITLE 18/19:		0	SERVICE TYPE		PRIVATELY OWNED	
						License Exp Dt:		03/01/2017			
County	WILLIAMSON			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:				Facility ID:	007412		<u>Owner Information</u>				
COUNTY GLEN COMMUNITY RESIDENCE						KENMAR RESIDENTIAL SERVICES INCORPORATED					
308 COUNTY GLEN						33 CYPRESS BLVD					
LEANDER				TX	78641				,SUITE 100		
Phone	(512) 259-7573			Fax	(512) 259-3873			78665			
TOTAL Lic Capacity:				0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:				0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	
PRIVATE Beds:				0	TITLE 18/19:		0	SERVICE TYPE		PRIVATELY OWNED	
						License Exp Dt:		03/15/2018			
County	WILLIAMSON			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:				Facility ID:	007808		<u>Owner Information</u>				
BRUSHY CREEK COMMUNITY HOME						EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP					
803 BRUSHY CRK DR						9901 LINN STATION ROAD					
ROUND ROCK				TX	78664				40223-3808		
Phone	(512) 218-9483			Fax							
TOTAL Lic Capacity:				0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:				0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	
PRIVATE Beds:				0	TITLE 18/19:		0	SERVICE TYPE		PRIVATELY OWNED	
						License Exp Dt:		01/01/2017			
County	WILLIAMSON			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:				Facility ID:	003626		<u>Owner Information</u>				
GREYSON COMMUNITY RESIDENCE						KENMAR RESIDENTIAL SERVICES INCORPORATED					
2316 PEARSON WAY						33 CYPRESS BLVD					
ROUND ROCK				TX	78665				,SUITE 100		
Phone	(512) 336-0800			Fax	(512) 336-0812			78665			
TOTAL Lic Capacity:				0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:				0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	
PRIVATE Beds:				0	TITLE 18/19:		0	SERVICE TYPE		PRIVATELY OWNED	
						License Exp Dt:		10/19/2017			
County	WILLIAMSON			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:				Facility ID:	007444		<u>Owner Information</u>				
MUSTANG COMMUNITY RESIDENCE						KENMAR RESIDENTIAL SERVICES INCORPORATED					
4207 DEER TRACT						33 CYPRESS BLVD					
ROUND ROCK				TX	78681				,SUITE 100		
Phone	(512) 246-0434			Fax	(512) 246-0052			78665			
TOTAL Lic Capacity:				0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:				0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	
PRIVATE Beds:				0	TITLE 18/19:		0	SERVICE TYPE		PRIVATELY OWNED	
						License Exp Dt:		03/15/2018			
County	WILLIAMSON			Reg Svcs:	IID (AUSTIN REGION)			Region	07 - AUSTIN		
Facility Information:				Facility ID:	007605		<u>Owner Information</u>				
MALLARD COMMUNITY RESIDENCE						KENMAR RESIDENTIAL SERVICES INCORPORATED					
1609 MALLARD						33 CYPRESS BLVD					
TAYLOR				TX	76574				,SUITE 100		
Phone	(512) 365-3743			Fax	(512) 365-3743			78665			
TOTAL Lic Capacity:				0	TITLE 18:		0	ICF/IID:		6	
Cert Alzh Capacity:				0	TITLE19:		0	PROGRAM TYPE:		ICF/IID	
PRIVATE Beds:				0	TITLE 18/19:		0	SERVICE TYPE		PRIVATELY OWNED	
						License Exp Dt:		03/15/2018			

County **WILLIAMSON**

Reg Svcs: IID (AUSTIN REGION)

Region 07 - AUSTIN

**Facility Information:** Facility ID: 003680

**Owner Information**

TAYLOR COMMUNITY RESIDENCE

KENMAR RESIDENTIAL SERVICES INCORPORATED

4600 NORTH DRIVE

33 CYPRESS BLVD ,SUITE 100

TAYLOR

TX 76574

ROUND ROCK TX 78665

**Phone** (512) 365-9727

**Fax** (512) 365-8471

**PHONE:** (512) 336-0800

**FAX:** (512) 336-0812

**TOTAL Lic Capacity:** 0

**TITLE 18:** 0

**ICF/IID:** 6

**Cert Alzh Capacity:** 0

**TITLE19:** 0

**PROGRAM TYPE:** ICF/IID

**SERVICE TYPE** PRIVATELY OWNED

**PRIVATE Beds:** 0

**TITLE 18/19:** 0

**License Exp Dt:** 03/15/2018